FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90270 019 ****55.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000019647

1. Entity Name
BEAR CAT PROPERTIES, LLC

Principal Place of Business	Mailing Address
3389 SHERIDAN ST. #531 HOLLYWOOD, FL 33021	3389 SHERIDAN ST. #531 HOLLYWOOD, FL 33021

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
2269 S. University Dr		2269 S University DR.	
Suite, Apt. #, etc. #350		Suite, Apt. #, etc. #350	
City & State DAVIE FL		City & State DAVIE FL	
Zip 33324	Country Broward	Zip 33324	Country Broward

4. FEI Number — Applied For / ✓ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FLORIDA FILING & SEARCH SERVICES, INC.
1333 N. DUVAL STREET
TALLAHASSEE, FL 32303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Donald King 2269 S. University DR, #350 DAVIE, FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (10/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DONALD KING 4/24/03 561 630-4124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #