

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90750 011 *****50.00

DOCUMENT # L02000021071

1. Entity Name

JUNO 1041, LLC



Principal Place of Business

**2401 PGA BLVD., SUITE 272
C/O ROBERT LEE SHAPIRO
PALM BEACH GARDENS FL 33410**

Mailing Address

**2401 PGA BLVD., SUITE 272
C/O ROBERT LEE SHAPIRO
PALM BEACH GARDENS FL 33410**

2. Principal Place of Business

1897 Palm Beach Lakes Blvd.

Suite, Apt., etc.

#223

3. Mailing Address

1897 Palm Beach Lakes Blvd.

Suite, Apt., etc.

#223

City & State

West Palm Beach, FL

Zip

33409

Country

USA

City & State

West Palm Beach, FL

Zip

33409

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

47-0884091

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SHAPIRO, ROBERT LEE P.A.
2401 PGA BLVD., SUITE 272
PALM BEACH GARDENS FL 33410**

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

President, Director
Donald Weiser
1897 Palm Beach Lakes Blvd. #223
West Palm Beach, FL 33409

☐ Delete

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CITY-ST-ZIP

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10. ADDITIONS/CHANGES

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/8/2003 561-491-0263

Date

Daytime Phone #

CR2E083 (10/02)