## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## FILED Jun 16, 2003 8:00 am Secretary of State

1. Entity Nan	ne	# <b>LO2000</b> 0 maues, ilc	21714	/			05-01-20	103 90081	028 ****	*50.00	
Principal Place of Business 19 LISTER AVENUE NEWARK NJ 07105			Mailing Address 19 USTER AVENUE NEWARK NJ 07105			44004540					
2. Principal Place of Business			3. Mailing Address						i I		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State			City & State			4. FEI Num	1ber 06-16	47 10	<b>~</b> ~ ~ ~ ~	pplied For of Applicable	
Zip Country		Zip Coun		itry	5. Certifica	ite of Status Desired		\$5.00 Ad Fee Require			
	6. Name	and Address of Current	Registered Agent			7. Name si	nd Address of New	Registered	Agent		_
.1414	TUNKA 140	UN1 40 1:500	_	·	Name					• •	
WATKINS, NICHOLAS J'ESQ HOWE, ROBINSON & WATKINS, ILP 501 BRICKELL KEY DRIVE, \$504					Street Address (I	P.O: Box Num	ber is Not Acceptal	ole)-			<u> </u>
	MI FL 3313			1	1		•				ĺ
					City	FL Zip Code					
	named entity tions of regist		the purpose of changing its	registere	ed office or register	ed agent, or b	ooth, in the State of I	Florida. 1 am	familiar with,	and accept	
SIGNATURE .	<del></del>	or printed name of registered agent a				<del></del> _					
	Signature, typed	or printed name of registered agent a	nd bits if applicable. (NO)	E: Registere	d Agent signature required	Allen tekterativity)		DATE	<del></del>		┨
	<del></del>			le.to.Flo	FEE IS \$50.00 orlda Departmer ay 1, 2003	nt of State		44 <del>5 <u></u> 2</del> -2			}
9.		MANAGING MEMBE		10.			ADDITION	CICHANCED	<del></del>		4
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delcta	TITLE NAME STREE		,	<del></del>	<del></del>	Change	Addition	
Indicated	on this report	y or the receiver or trustee	his filing does not qualify for nat my signature shall have t empowered to execute this r	he same	legal effect as if ma	ade under oat	h; that I am a mana	. I further cert iging membe	ify that the in r or manager	formation of the	