

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2003 8:00 am
Secretary of State

05-20-2003 90027 002 *****50.00

DOCUMENT # L02000023588

1. Entity Name

S.N.D. HOLDING, LLC



Principal Place of Business

**848 BRICKELL KEY DRIVE APT. 1502
MIAMI FL 33131**

Mailing Address

**848 BRICKELL KEY DRIVE APT. 1502
MIAMI FL 33131**

10103410



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

7. Name and Address of New Registered Agent

**ROUSSO, MARK E
3440 HOLLYWOOD BLVD STE. 360
HOLLYWOOD FL 33021**

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 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**MANAGING MEMBER
KAREEM ABUGHAZALEH
848 BRICKELL KEY DRIVE, APT 1502
MIAMI, FL 33131**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

Date

Daytime Phone #

SIGNATURE REQUIRED

5/14/03

(305) 520-8345

CR2E083 (10/02)

0013503

Attachment

10105418

#LD5000073588

5/14/03

Florida Department of State, Division of Corporations: 2003 Uniform Business Report

Dear Sir or Madam:

I am aware that this is being sent almost two weeks after the stated deadline of May 1st. Please be advised that when this package was received, it was misplaced and I was unable to find it until a couple of days ago after an intense search. While this is no excuse for turning it in late, it is the truth. Moreover, this is the first time I have established an LLC and was not entirely aware of the urgency of making sure that this report is turned back in, in a timely manner. Since creating this LLC, it has been inactive on the income side and used only for the purpose of investing in real estate with no real cash generation so far. I will abide and comply with any potential penalties set forth as a result of this delinquency, but I sincerely request the possibility of a waiver of any additional fees due to the circumstances mentioned above. I hope that you will consider my plea. Thank you very much for your time.

Sincerely,

K. Abughazaleh 5/14/03
Kareem Abughazaleh