2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000023746

BIG LEAGUE MANAGEMENT DOVE, L.L.C.



FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90072 019 ****50.00

Daytime Phone #

Principal Plac	e of Business	Mailing Address		7	,				
20018 WEST DE	HE HIGHWAY	20018 WEST DIXIE HIGHWAY	•						
AVENTURA FL		AVENTURA FL 33180							
PO BOY		PO 80X 403353	E. 20.11	1 1100111	11. Eli 88 11 (1811 1881 1881 1881 18	N 8808 9881	1 1615 1 75 6 1	ABAB BAN 4884	
	eAc4 FC 33146	MIGMI BGACU 1 3. Mailing Address	te 33/40	- 					
	403353	PO BOX 4	03.363		IN BU OSINO NON OBUN DONI BO				
Suite, Apt.		Suite, Apt. #, etc.			CHECK HERE IF	MAKING	CHANGES	3	
City & State	BEACH FL	City & State MIAMI BEA	CH, FZ	4. FEI Num	-04486/3			Applied For Not Applicable	}
33140	Country USA	33140	Country US A	5. Certifica	ite of Status Desired		5.00 Acee Requir		
	6. Name and Address of Current R	egistered Agent 🐷 🕒 🖘 👊		- 7. Name ar	nd Address of New Reg	Istered Ag	jent	·]
COR	EINKEL MEGTOD	Name						1	
	FINKEL, NESTOR	Street Address	(P.O. Box Num	ber is Not Acceptable)				1	
20818 WEST DIXIE HIGHWAY AVENTURA FL 33180									4
AVEI	(10hA 1 L 33 100								
			City			FI	Zip Cod	de	1
				_ 		<u>FL</u>			- ـ إ
	named entity submits this statement for ons of registered agent.	the purpose of changing its r	egistered office or registe	ered agent, or b	ooth, in the State of Floric	ia. I am fai	miliar with	, and accept	
trie obligati	ons or registered agent.								
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable (NOTE:	Registered Agent signature require	ed when reinstation)		DATE			
			W!!! FEE IS \$50.00						
			to Florida Departme	ent of State					
			By May 1, 2003					<u>.</u>	4
9	MANAGING MEMBER		10.	· - ··	ADDITIONS/CI				ا ا
TITLE	MANAGER NARKOY BRAFMAN	☐ Delete	TITLE NAME				☐ Change	☐ Addition	Š
NAME STREET ADDRESS	20818 WEST CIXIC HU	4	STREET ADDRESS						15
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TITLE	M9N466R	□ Delete	TITLE				Change	☐ Addition	18
NAME	ELI WEBGRAAN	← Delete	NAME			. '	onlange		1
STREET ADDRESS	20818 West PIXIE HW	4	STREET ADDRESS						
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11. I hereby certify that the information supplied with this filling 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.									
m nicu ilai	only company or the receiver or trustee t	Surbossoring to execute tills is	sport as required by original	p.c. 000, 1 londs	a Guardio.				1