2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000024359

1. Entity Name

QUARTZ ENTERPRISES, LLC

Principal Plans of Pusiness

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME O



FILED Jan 29, 2003 8:00 am Secretary of State 01-29-2003 90051 038 ****50.00

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		382 NORTH QUARTZ AVENUE HERNANDO FL 34442								
			· _							
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Nur		- 		pplied For ot Applicable		
Zip	Country	Zip Cour		try	5. Certifica	ate of Status Desired		5.00 Add		
	6. Name and Address of Current Re	egistered Agent	stered Agent			7. Name and Address of New Registered Agent				
MFAI	HL, GREGORY W	•		. Name_	التنبيب يتاعوه مراهي	- 4 -0, 18			•	
382 1	NORTH QUARTZ AVENUE NANDO FL 34442	Street Addre			ddress (P.O. Box Nun	ess (P.O. Box Number is Not Acceptable)				
1 1441 11	VIIDO I COVIIZ									
		٠,		City			FL	Zip Cod	ie	
8. The above r	named entity submits this statement for t	he ourpose of changing its	register	ed office o	r registered agent, or	hoth, in the State of Florid		niliar with	and accept	
	ons of registered agent.	ne purpose or changing its	a register	SO OHICE OF	registered agent, or	oon, in the State of Fiore	Ja. ા ટાાા iટા	imiai Willi,	and accept	
SIGNATURE _										
JIGNATURE _	Signature, typed or printed name of registered agent and	title if applicable. (NOT	E: Registere	d Agent signat	ure required when reinstating)		DATÉ			
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		Make Check Payab								
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9.	MANAGING MEMBERS	S/MANAGERS	10.		· · · · · ·	ADDITIONS/C	HANGES			
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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 of trustee empowered to execute this report is required by Chapter 608, Florida Statutes.

MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE