

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 27, 2003 8:00 am**  
**Secretary of State**

05-27-2003 90056 022 \*\*\*\*50.00

**DOCUMENT # L02000024542**

1. Entity Name

**BARAH INVESTMENT, L.L.C.**



Principal Place of Business

1651 N.W. 59TH WAY  
SUNRISE FL 33313

Mailing Address

1651 N.W. 59TH WAY  
SUNRISE FL 33313

2. Principal Place of Business

**3363 SPANISH MOSS TERRACE**

3. Mailing Address

**3363 SPANISH MOSS TERRACE**

Suite, Apt. #, etc.

**APT # 4**

Suite, Apt. #, etc.

**APT # 4**

City & State

**LAUDER HILL FL**

City & State

**LAUDER HILL FL**

Zip

**33319**

Country

**BROWARD**

Zip

**33319**

Country

**BROWARD**

6. Name and Address of Current Registered Agent

**HARRIOTT, BYRON**  
**1651 N.W. 59TH WAY**  
**SUNRISE FL 33313**

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

TITLE **DIRECTOR** ☐ Delete  
NAME **BYRON HARRIOTT**  
STREET ADDRESS **3363 SPANISH MOSS TERRACE**  
CITY-ST-ZIP **LAUDER HILL FL 33319**

TITLE **DIRECTOR** ☐ Delete  
NAME **RHODINE HARRIOTT**  
STREET ADDRESS **3363 SPANISH MOSS TERRACE**  
CITY-ST-ZIP **LAUDER HILL FL 33319**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **DIRECTOR** ☐ Change ☐ Addition  
NAME **BYRON HARRIOTT**  
STREET ADDRESS **3363 SPANISH MOSS Terr.**  
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **DIRECTOR** ☐ Change ☐ Addition  
NAME **RHODINE HARRIOTT**  
STREET ADDRESS **3363 SPANISH MOSS Terrace**  
CITY-ST-ZIP **LAUDERHILL FL 33319**

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

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

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

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

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 REQUIRED**

**5-20-03**

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

Date

Daytime Phone #

CR2E083 (10/02)