


AMENDED

FILED

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

03 APR -1 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000025327	
1. Entity Name CLUB ZNO, LLC	


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1439 Washington Avenue Suite, Apt. #, etc.		3. Mailing Address 1439 Washington Avenue Suite, Apt. #, etc.	
City & State Miami Beach, FL		City & State Miami Beach, FL	
Zip 33139	Country USA	Zip 33139	Country USA

DO NOT WRITE IN THIS SPACE

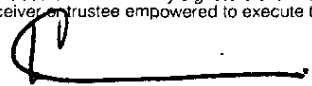
4. FEI Number 16-1635279		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Louis J. Terminello, Esq.	
	Street Address (P.O. Box Number is Not Acceptable) Terminello & Terminello, P.A.	
	2700 S.W. 37th Avenue	
	City Miami	FL Zip Code 33133

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 	DATE 03/25/03

FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1		600015168346 04/02/03--01034--007 **25.00
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9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Thomas, Peter 1439 Washington Avenue Miami Beach, FL 33139	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600015168346 04/02/03--01034--008 **25.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Mays, David 1439 Washington Avenue Miami Beach, FL 33139	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Scott, Raymond Edward 1439 Washington Avenue Miami Beach, FL 33139	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
SIGNATURE: 	03/19/03 (305) 531-1990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #

CR2ED83B (12/02)

Charter Number Only

VALIDATION ONLY

Terminello & Termirello

Requestor's Name

2100 SW 37 Ave

Address

Miami, FL 33133

City

State

ZIP

Phone

CORPORATION(S) NAME

CLUB ZNO, LLC

RECEIVED
03 MAR 28 AM 9:57
STATE
DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> Profit | <input checked="" type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier



Empire Toll Free: 1-800-432-3028