

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

2/13/2003-90025-013-\$50.00-\$50.00

00116/3

DOCUMENT # L02000026251

1. Entity Name

SOUTHERN SHORES ACQUISITIONS, L.L.C.



FILED
03 OCT 30 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

560 SW 12TH AVENUE
POMPANO BEACH FL 33069

Mailing Address

560 SW 12TH AVENUE
POMPANO BEACH FL 33069

2. Principal Place of Business

560 S. ANDREWS AVE.
Suite, Apt. #, etc.

3. Mailing Address

560 S ANDREWS AVE.
Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State

POMPANO BEACH

City & State

POMPANO BEACH

4. FEI Number

Applied For

Not Applicable

Zip

33069

Country

Zip

33069

Country

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

TURCOTTE, MARIO
560 SW 12TH AVENUE
POMPANO BEACH FL 33069

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

Mario Turcotte

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 Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP
MGR M
DAVID O'BRIEN
2610 N.E. 19TH ST.
POMPANO BEACH FL. 33062

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP
MGR M
ABRAHAM LODEN
3304 ROBBERSON RD.
POMPANO BEACH FL. 33062

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP
MGR M
ALEX VANCE
3313 SE 4TH ST.
POMPANO BEACH FL. 33062

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP
MGR.
MARIO TURCOTTE
560 SW 12TH AVE.
POMPANO BEACH FL. 33069

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
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:

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

1/10/03 (954) 788-6788
Date Daytime Phone #

CR2E083 (10/02)