

2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

4/1/20

DOCUMENT # L02000027329
1. Entity Name
FBA INVESTMENTS, LLC

Principal Place of Business
**190 SOUTH CREEK BOULEVARD
DAVIDA-BOCA FL 32129**

Meeting Address
**190 SOUTH CREEK BOULEVARD
DAVIDA-BOCA FL 32129**

2. Principal Place of Business
3425 S. ATLANTIC AVE

3. Mailing Address
**ACT 703
DAVIDA BOCA FL
32118**

4. FEI Number
16-1163200B

5. Certificate of Taxes Debted
 \$5.00 Annual Fee
 Fee Required

6. Name and Address of Current Registered Agent
**FRED ALLEN II
3800 TURTLE CREEK DRIVE STE 201
PORT ORANGE FL 32127**

7. Name and Address of New Registered Agent

8. The above report only submits the information for the purpose of changing its registered office or registered agent, or both, in the State of Florida. It does not constitute a return, and except for the information so reported, it does not constitute a return.

SIGNATURE: _____

FILE NUMBER FEE IS \$50.00
Make Check Payable to Florida Department of State
Due by May 1, 2003

managing member

MANAGING MEMBERS/MANAGERS		NON-MANAGING MEMBERS	
NAME FRED ALLEN II	<input type="checkbox"/> Owner	NAME FRED ALLEN II	<input type="checkbox"/> Owner
STREET ADDRESS 3425 S ATLANTIC AVE		STREET ADDRESS 3425 S ATLANTIC AVE	
CITY-STATE-ZIP DAVIDA BOCA FL 32118		CITY-STATE-ZIP DAVIDA BOCA FL 32118	
TITLE MANAGING MEMBER		TITLE MANAGING MEMBER	
NAME FRED ALLEN II	<input type="checkbox"/> Owner	NAME FRED ALLEN II	<input type="checkbox"/> Owner
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TITLE MANAGING MEMBER		TITLE MANAGING MEMBER	
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CITY-STATE-ZIP DAVIDA BOCA FL 32118		CITY-STATE-ZIP DAVIDA BOCA FL 32118	
TITLE MANAGING MEMBER		TITLE MANAGING MEMBER	

9. I hereby certify that the information supplied was true and correct and that any changes which have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company of the territory, or both, as provided in Section 605.01, Florida Statutes.

SIGNATURE: **FRED ALLEN II** **3/28/03**

44003172



CHECK HERE IF MAKING CHANGES

COPIES (TOTAL)