

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 30, 2003 8:00 am
Secretary of State

06-30-2003 90001 002 ****50.00

DOCUMENT # L02000032019

1. Entity Name
CHA FLORIDA, LLC



Principal Place of Business
**2151 WEST HILLSBOROUGH BLVD., SUITE 102
DEERFIELD BEACH, FL 33442**

Mailing Address
**2151 WEST HILLSBOROUGH BLVD., SUITE 102
DEERFIELD BEACH, FL 33442**

10109240

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

14-1858519

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BECKER, GLENN A
2151 WEST HILLSBOROUGH BLVD., SUITE 102
DEERFIELD BEACH, FL 33442**

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's 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 **CEO** ☐ Delete
NAME **Glenn A. Becker**
STREET ADDRESS **2151 W. Hillsboro Blvd # 102**
CITY-ST-ZIP **Deerfield Beach, FL 33442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition

NAME
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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: **Glenn A. Becker** x

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

Date

Daytime Phone #

(800)729-8922

CF2E083 (10/02)



Attachment
10109240

June 26, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: CHA MIAMI – DOCUMENT #L02000032004
CHA FLORIDA – DOCUMENT #L02000032019

To Whom It May Concern:

Please accept our apology for untimely filing of the Uniform Business Reports on the aforementioned Limited Liability Companies.

These were two newly formed companies this year so we were not notified from you and it completely slipped our minds. It was not until our attorney recently brought it to our attention that we realized it was due.

Sincerely,

A handwritten signature in black ink, appearing to read "Glenn A. Becker".

Glenn A. Becker
CEO