LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000033139

1. Entity Name

SIGNATURE:

FORMOSA GARDEN & LAKE, L. L.C.



FILED Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90047 022 ****50.00

	DO NOT WRITE	IN THIS S	PACE		
7771	al Place of Business DELTONA BLVD., #15 pt. #, etc.	3. Mailing Address 777 DELTONA B Suite, Apt. #, etc.	2VS#15	DO NOT WRITE IN TH	S SPACE
City & Si	ONA, FL.	City & State DELTONA FL		4. FEI Number 06-166622	Applied For
327	25 Country U.S.A.	32725	Country U.S.A.	5. Certificate of Status Desired	\$5.00 Additional Fee Required
	DO NOT W IN THIS SP	Contract of the Contract of th	8.57_/7/8	7. Name and Address of Current Register PH FOLMOSO P.O. Box Number is Not Acceptable) LLENE DELVE	ed Agent
8. The abov	e named entity submits this statement for	the purpose of changing its	City DELTO	PNA Florida. I am	Zip Code 32725
SIGNATURE	Signature, typed or printed name of registered agent as	l Make Check Payab C	FEE IS \$50:00 le to Florida Departmer DUE BY MAY 1	nt of State	
NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER PRESIDENT FORMOSO, JOSEPH 851 ARLENE DRIVE DELTONA, FL. 32125	S/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SECRETARY FORMOSO, EVA 851 PRIENE DRIVE DELTONA, FL. 32125		TITLE NAME STREET ADDRESS OTTY - ST-ZIP		
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indicated or limited liable	rtify that the information supplied with this n this report is true and accurate and that lity company or the receiver or trustee en	s filing does not qualify for the t my signature shall have the powered to execute this rep	ne exemption stated in Section e same legal effect as if made port as required by Chapter 6	on 119.07(3)(i), Florida Statutes. I further certi e under oath; that I am a managing member 508, Florida Statutes.	y that the information or manager of the

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