

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 30 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L96000001258

1. Entity Name
BROWARD SQUARE L.C.

Principal Place of Business

2318 N. BAY ROAD
MIAMI BEACH FL 33140

Mailing Address

2318 N. BAY ROAD
MIAMI BEACH FL 33140-4261

2. Principal Place of Business

121 E. BROWARD BLVD

3. Mailing Address

SAME

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE

City & State

4. FEI Number

65-0711967

Applied For

Not Applicable

Zip

33301

Country

USA

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KURTEN, LEONHARD
2318 N. BAY ROAD
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

121 E. BROWARD BLVD, SUITE 200

City

FORT LAUDERDALE

FL

Zip Code
33301

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.

SIGNATURE

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 Department of State

400003258504--0
-05/19/00--01006--013
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE NAME MGRM KURTEN, LEONHARD
STREET ADDRESS 2318 N. BAY ROAD
CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE NAME MGRM INTER INVEST PROPERTIES
STREET ADDRESS 2318 N. BAY ROAD
CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS 121 E. BROWARD BLVD SUITE 200
CITY-ST-ZIP FORT LAUDERDALE, FL 33301

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS INTER INVEST LLP
CITY-ST-ZIP 121 E. BROWARD BLVD, SUITE 200
FORT LAUDERDALE, FL 33301

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER
KURTEN

Date

Daytime Phone #

CR2E083 (9/99)