

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2002 8:00 am
Secretary of State

06-05-2002 90418 019 ****50.00

DOCUMENT # L98000000742

1. Entity Name

DAZA-JALLER CONSTRUCTION L.L.C.

Principal Place of Business

**1835 PRIMROSE LANE
WELLINGTON FL 33414**

Mailing Address

**1835 PRIMROSE LANE
WELLINGTON FL 33414**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0864310**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NORBERTO, DAZA
1835 PRIMROSE LANE
WELLINGTON FL 33414**

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.

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
Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
	MGRM			☐ Delete					☐ Change	☐ Addition
	DAZA, NORBERTO									
	1835 PRIMROSE LANE									
	WELLINGTON FL 33414									
	MGRM			☐ Delete					☐ Change	☐ Addition
	DAZA-JALLER, ANA T									
	1835 PRIMROSE LANE									
	WELLINGTON FL 33414									
				☐ Delete					☐ Change	☐ Addition
				☐ Delete					☐ Change	☐ Addition
				☐ Delete					☐ Change	☐ Addition
				☐ Delete					☐ Change	☐ Addition

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 of Ana T. Daza-Jaller

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

Date

Daytime Phone #

5/10/02 (381) 248-5277

CR2E083 (9/01)