

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

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DOCUMENT # L98000001420

1. Entity Name
RAHLFS ENTERPRISES, L.C.

00 MAY -3 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O SWISS LINK
P.O. BOX 320013
COCOA BEACH FL 32932-0013

Mailing Address
C/O SWISS LINK
P.O. BOX 320013
COCOA BEACH FL 32932-0013



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3558058

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SOILEAU, JOHN L ESQ.~~
~~1970 MICHIGAN AVENUE, BLDG. C~~
~~COCOA FL 32922~~

Name Suzanne Violet
Street Address (P.O. Box Number is Not Acceptable) 3165 N. Atlantic Ave.
City Cocoa Beach FL Zip Code 32931

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 Suzanne Violet Suzanne Violet 4-26-00
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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME RAHLFS, GUENTER
STREET ADDRESS P.O. BOX 320013
CITY-ST-ZIP COCOA BEACH FL 32932-0013

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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] REG. RAHLFS 4-26-00 321-7839992
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (9/99)