# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000001494

1. Entity Name

EMERALD ASSET ADVISORS, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JAN 13 AM 10:33

| Principal Place of Business | Mailing Address |
|---|---|
| 2500 WESTON ROAD, SUITE 318<br>WESTON FL 33331 | 2500 WESTON ROAD, SUITE 318<br>WESTON FL 33331-3617 |

DO NOT WRITE IN THIS SPACE MJH

| 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 52-2119367 ☐ 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 |
|---|---|
| SOUTH FLORIDA REGISTERED AGENTS, INC.<br>200 E. LAS OLAS BLVD., SUITE 1900<br>FT. LAUDERDALE FL 33301 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $50.00**
**Make Check Payable to Department of State**

| 9. MANAGING MEMBERS / MEMBERS | | | 10. ADDITIONS / CHANGES | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGR<br>ISBITTS, ROBERT<br>2500 WESTON ROAD, SUITE 318<br>WESTON FL 33331 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | member<br>BARUCH (BRUCE) LEVY<br>2500 weston Rd #318<br>Weston Fl. 33331 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | JANE LEVY<br>2500 Weston Rd. #318<br>Weston Fl 33331 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | member<br>SCOT HUNTER<br>2500 weston Rd #318<br>Weston Fl. 33331 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Barbara Hunter<br>2500 weston Rd. #318<br>Weston Fl 33331 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 200003103762--3<br>-01/20/00--01018--006<br>*****50.00 *****50.00 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E083 (9/99)

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:** _____ 1/5/00 954-385-9624
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #