2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State
04-17-2002 90022 040 ****50.00

DOCUMENT # L98000001844

1. Entity Name
PORT 1100, L.L.C.

Principal Place of Business	Mailing Address
1100 SE 24TH STREET FORT LAUDERDALE FL 33335	P.O. BOX 21516 FT. LAUDERDALE FL 33335

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
		P.O. Box 535	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State: RICHFIELD, OHIO	
Zip	Country	Zip: 44286-0535	Country: U.S.A.

4. FEI Number 65-0869710 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HEIDGERD, FREDERICK C
600 EST HILLSBORO BLVD., #520
DEERFIELD BEACH FL 33441-1611

7. Name and Address of New Registered Agent

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 ______________________________ 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
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAWUK, EMIL 7000 S.E. LAKEVIEW TERRACE STUART FL 34996	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAWUK, E. MARK 2958 BRECKSVILLE ROAD RICHFIELD OH 44286-0535	☐ 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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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.

AMERICAN EXPRESS TAX AND BUSINESS SERVICES INC.
ID # 41-1795707
1001 LAKESIDE AVE. E. SUITE 2000 CLEVELAND, OH

SIGNATURE: [signature] Manager 4/16/02 330/659-9393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #