## **2003 LIMITED LIABILITY COMPANY** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L98000002588

1. Entity Name

**SIGNATURE:** 

KRAFT CUSTOM HOMES, L.L.C.



## **FILED** Mar 06, 2003 8:00 am Secretary of State 03-06-2003 90004 006 \*\*\*\*55.00

Daytime Phone #

		,	WE TRUS					
Principal Place of Business 2606 SOUTH HORSESHOE DRIVE NAPLES FL 34104		Mailing Address 2606 SOUTH HORSESHOE NAPLES FL 34104	DRIVE					
2. Principal F	Place of Business	3. Mailing Address						
Cuita Ant III ata		C. da A. A. H		_				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Numb	oer <b>65-088072</b> 3	3	<b>├</b>	pplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired			\$5.00 Additional Fee Required	
-	6. Name and Address of Current R	egistered Agent		7. Name an	d Address of New Re	gistered A	gent	
PF7	ESHKAN, FARHAD F		Name					
260	6 SOUTH HORSESHOE DRIVE PLES FL 34104		Street Address	Street Address (P.O. Box Number is Not Acceptable)				
INAF	TEO FE 34104							
			City			FL	Zip Cod	
	named entity submits this statement for titions of registered agent.	he purpose of changing its	registered office or regist	tered agent, or bo	oth, in the State of Flor	ida. I am f	amiliar with,	and accept
•								
SIGNATURE	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE	: Registered Agent signature requi	ired when reinstating)		DATE		
		FILE NO	W!!! FEE IS \$50.00	0				
3		Make Check Payable	e to Florida Departm	ent of State				
*		Due	By May 1, 2003	1				
9.	MANAGING MEMBER	S/MANAGERS	10.	L	ADDITIONS/0	CHANGES		
TITLE	MGRM	Delete	TITLE				Change	☐ Addition
NAME	KRAFT CONSTRUCTION CO INC		NAME					
STREET ADDRESS CITY-ST-ZIP	2606 SOUTH HORSESHOE DRIVE NAPLES FL 34104		STREET ADDRESS CITY-ST-ZIP	•				
TITLE	P	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	PEZESHKAN, FRED F	L Delete	NAME				□ Change	LJ Addition
STREET ADDRESS	2606 SOUTH HORSESHOE DRIVE		STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL 34104		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
NAME	CARSELLO, ROBERT		NAME					
STREET ADDRESS CITY-ST-ZIP	2606 SOUTH HORSESHOE DRIVE   NAPLES FL 34104		STREET ADDRESS CITY-ST-ZIP					
TITLE	V	□ Delete	TITLE				☐ Change	☐ Addition
NAME	PEZESHKAN, KOUROSH	L Delete	NAME				☐ Change	∐ Audition
STREET ADDRESS	2606 SOUTH HORSESHOE DRIVE		STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL 34104		CITY-ST-ZIP					
TITLE	V	· Delete	TITLE				☐ Change	☐ Addition
NAME	DALY, JOHN		NAME					
STREET ADDRESS	2606 SOUTH HORSESHOE DRIVE		STREET ADDRESS			•	. •	
CITY-ST-ZIP	NAPLES FL 34104		CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
indicated	certify that the information supplied with the on this report is true and accurate and the	at my signature shall have th	ne same legal effect as if	made under oath	n: that I am a managir	further certing member	fy that the ir	nformation or of the
limited lia	bility company or the receiver or trustee e	rnpowered to execute this re	eport as required by Cha	pter 608, Florida	Statutes.		J	

MANAGER, OR AUTHORIZED REPRESENTATIVE