

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90208 030 ****50.00

DOCUMENT # L98000003257

1. Entity Name

ZENEX J2, L.L.C.

Principal Place of Business

**777 YAMATO ROAD
 STE. 350
 BOCA RATON FL 33431**

Mailing Address

**GOLDSTEIN, LEWIN & CO.
 1900 NW CORPORATE BLVD., E-300
 BOCA RATON FL 33431**

2. Principal Place of Business

16046 Rio Del Sol

3. Mailing Address

Suite, Apt. #, etc.

City & State

Delray Beach, FL

City & State

Zip

Country

33446

USA

4. FEI Number

65-0880298

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**QUEEN, JEFFREY
 777 YAMATO ROAD
 STE. 350
 BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name **Same**

Street Address (P.O. Box Number is Not Acceptable)

16046 Rio Del Sol

City **Delray Beach**

FL

Zip Code **33446**

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

TITLE **MGRM** ☐ Delete
 NAME **QUEEN, JEFFREY**
 STREET ADDRESS **777 YAMATO ROAD, STE. 350**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **16046 Rio Del Sol**
 CITY-ST-ZIP **Delray Beach, FL 33446**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

Date

Daytime Phone #

CR2E083 (9/01)