

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000000133

1. Entity Name
JUST BALLYHOO, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 15 PM 1:32

Principal Place of Business
28 EAST 16TH STREET
RIVIERA BEACH FL 37801

Mailing Address
28 EAST 16TH STREET
RIVIERA BEACH FL 33404-5620



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2300 AVE. E.
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
RIVIERA BEACH, FL.

City & State

4. FEI Number
62-1763781

Applied For
Not Applicable

Zip
33404

Country
U.S.

Zip

Country

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

VANMUNSTER, RICHARD G
28 EAST 16TH STREET
RIVIERA BEACH FL 33405

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

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
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
VANMUNSTER, RICHARD G
28 EAST 16TH STREET
RIVIERA BEACH FL 33405 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition
mf 3/21/00

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
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CITY- ST- ZIP
☐ Change ☐ Addition
6000003187646--3
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TITLE
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☐ 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)