2001	UNIF	ORM	BUSINESS	REPORT	(UBR
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

				,	_	, ,				
DOCUMENT # L9900000138 1. Entity Name COLLINS PARK, L.L.C.				FILED						
						OI APR I	7 PH 2	2: 43		
Principal Place of Business 21490 WEST DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180 Mailing Address 21490 WEST DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180 NORTH MIAMI BEACH FL						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
							. 100 - 1 00 13 0 1		10 1910 I 1011 1001	
2. Principal	Place of Business	3. Mailing Address			_					
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Sta	nte	City & State								
Zip	Country	Zip	Cour	nter (7. 1	4. FEI Number NOT APPLICABLE Applied For Not Applicable				
	·		Cour	10 y		ficate of Status Desired	- L	\$5.00 Ad Fee Require		
	6. Name and Address of Curren	t Hegistered Agent		Name	7. Nam	e and Address of New F	legistered A	gent		
	a, roberto Izura construction			Street Address	(P.O. Box Number is Not Acceptable)					
	EST DIXIE HIGHWAY	•								
NORTH I	MIAMI BEACH FL 33180		City				FL	Zip Cod	le	
8. The above	e named entity submits this statement f	or the purpose of changing its	register	ed office or registe	red agent,	or both, in the State of Flo	rida.			
SIGNATURE										
	Signature, typed or printed name of registered agen	T		d Agent signature require	d when reinstati	ng)	DATE			
		FILE N Make Check Pa		FEE IS \$50.00 o Department (of State					
9.	MANAGING MEME		10.			ADDITIONS,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VERZURA, ROBERTO 21490 WEST DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180	☐ Delete						Change	☐ Addition	
TITLE NAME .		☐ Delete	TITLE			400004	—— 4079	☐ Change	Addition	
STREET ADDRESS	<u> </u>			ET ADDRESS ST-ZIP		400004 -04/2 ****	25/01∂ ⊯55.00	01092- ****	-020 *55.00	
TITLE NAME		☐ Delete	TITLE	i i				Change	Addition	
STREET ADDRESS CITY-ST-ZIP				: Et address :St-zip						
IITLE Name Street address City-St-Zip		☐ Delete						☐ Change	☐ Addition	
I	c	☐ Delete					(Change	Addition	
ame Treet address		☐ Delete		T ADDRESS ST-ZIP	<u> </u>		[Change	Addition	
TREET ADDRESS TY-ST-ZIP TILE IAME TREET ADDRESS TY-ST-ZIP 1. I hereby coindicated	ertify that the information supplied with on this report is true and a curate and oility company of the receiver or trustet	this filing does not qualify for	STREE CITY- TITLE NAME STREE CITY-;	T ADDRESS ST-ZIP T ADDRESS ST-ZIP Inpution stated in Selected in	iodo undor	aath, that I am a waxaxi				