

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 27 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L99000000337**

1. Entity Name
EQUITY REAL ESTATE, L.L.C.

Principal Place of Business
**3701 SOUTH CONGRESS AVENUE
LAKE WORTH FL 33461**

Mailing Address
**3701 SOUTH CONGRESS AVENUE
LAKE WORTH FL 33461-3753**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0886032

Applied For
Not Applicable

Zip

Country

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

**BARNETT, CHARLES D
500 AUSTRALIAN AVENUE SOUTH, SUITE 800
WEST PALM BEACH FL 33401**

*address
change only*

Name **Barnett, Charles D.**
Street Address (P.O. Box Number is Not Acceptable) **8412 Native Dancer Rd.**
City **Palm Beach Gardens FL** Zip Code **33418**

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 **4-18-00**

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

200003249532--5
-05/12/00--01010--001
*******50.00 *****50.00**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE	NAME	TITLE	NAME
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
MGRM	MUSA HOLDINGS, INC.		
3701 SOUTH CONGRESS AVENUE			
LAKE WORTH FL 33461			
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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 PRINTED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4-18-00

561-965-9110

MASSIMO MUSA Daytime Phone #

CR2E083 (9/99)