

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000000859

1. Entity Name

LEADING EDGE TECHNOLOGY GROUP L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -6 AM 9:35



DO NOT WRITE IN THIS SPACE

Principal Place of Business

300 S OINE ISLAND RD
SUITE 210
FT LAUDERDALE FL 33324

Mailing Address

300 S OINE ISLAND RD
SUITE 210
FT LAUDERDALE FL 33324

2. Principal Place of Business

300 S. Pine Island Rd
Suite, Apt. #, etc.
Suite 210

3. Mailing Address

300 S. Pine Island Rd.
Suite, Apt. #, etc.
Suite 210

City & State

Ft. Lauderdale, FL ~~33324~~

City & State

Ft. Lauderdale FL

Zip

33324

Country

Zip

33324

Country

4. FEI Number

65-0894126

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEVER, D. JEFFREY
8412 NW 47TH ST
CORAL SPRINGS FL 33067

7. Name and Address of New Registered Agent

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

rf 3/20/00

9. MANAGING MEMBERS/MEMBERS

TITLE NAME MGRM SAVANT CONSULTING SERVICES CORPORATION
STREET ADDRESS 1112 WESTON RD SUITE 205
CITY-ST-ZIP FT LAUDERDALE FL 33326 ☒ Delete

TITLE NAME MGRM GUTIERREZ, GARY O
STREET ADDRESS 10155 NW 9TH CIRCLE APT 403
CITY-ST-ZIP MIAMI FL 33192 ☒ Delete

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME MGRM D. JEFFREY DEVER ☒ Change ☐ Addition
STREET ADDRESS 8412 NW 47th Street
CITY-ST-ZIP Coral Springs, FL 33067

TITLE NAME MGRM HUGO G. PEREZ ☒ Change ☐ Addition
STREET ADDRESS 480 NW 161 Avenue
CITY-ST-ZIP Pembroke Pines, FL 33028

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

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

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

TITLE NAME ☐ Change ☐ Addition
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 REQUIRED

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

Date

Daytime Phone #

2/28/00

CR2E083 (9/99)