

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90297 014 ****50.00

DOCUMENT # L99000000873

1. Entity Name
KENDALL ISAN, L.L.C.

Principal Place of Business
2420 N.E. 27TH STREET
LIGHTHOUSE POINT FL 33064

Mailing Address
~~**2420 N.E. 27TH STREET**~~
~~**LIGHTHOUSE POINT FL 33064**~~

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.
1309 N.W. 136TH AVENUE
SUNRISE, FL

City & State

City & State
SUNRISE, FL

4. FEI Number **65-0959275**

Applied For
 Not Applicable

Zip Country

Zip Country
33323 USA

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

ISAN, JERAY
2420 N.E. 27TH STREET
LIGHTHOUSE POINT FL 33064

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
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
 NAME **MGRM**
 STREET ADDRESS **ISAN, JERRY B**
 CITY-ST-ZIP **2420 N.E. 27TH STREET**
LIGHTHOUSE POINT FL 33064

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 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: *X Jerry Isan* **SIGNATURE REQUIRED JERRY ISAN** *04-24-02 (954) 846-8400*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (9/01)