

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 22, 2003 8:00 am
Secretary of State

09-22-2003 90105 020 ****50.00

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DOCUMENT # L99000002078

1. Entity Name

HOSPITALITY HOLDINGS, L.L.C.



Principal Place of Business

**3011 EXCHANGE COURT, SUITE 106
WEST PALM BEACH FL 33409**

Mailing Address

**3011 EXCHANGE COURT, SUITE 106
WEST PALM BEACH FL 33409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0999906**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MEISEL, KEITH PA
712 US HWY ONE, SUITE 230
NORTH PALM BEACH FL 33408**

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. I am familiar with, and accept the obligations of registered agent:

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 Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **METZ, JOHN C**
STREET ADDRESS **3011 EXCHANGE COURT, SUITE 106**
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (4/03)

attachment

Keith W. Meisel, P.A.

Attorney at Law

Pavilion Office Center

712 U.S. Highway One, Suite 230
North Palm Beach, Florida 33408-4521

Telephone (561) 842-1025

Fax (561) 842-1375

September 18, 2003

Limited Liability Company
Division of Corporations
Uniform Business Report Filings
PO Box 6478
Tallahassee, FL 32314-6478

Re: Hospitality Holdings, L.L.C.

Dear Sir or Madam:

Enclosed please find a 2003 Limited Liability Company Uniform Business Report for the above referenced corporation. A check in the amount of \$50.00 is enclosed for your fee.

Should you have any questions, by all means please feel free to contact me.

Very truly yours,

KEITH W. MEISEL, P.A.

By



Keith W. Meisel, Esquire

KWM/cw
Enclosures