

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0011029

DOCUMENT # **L99000002929**

1. Entity Name

~~HIDDEN HARBOUR MARINA, L.L.C.~~

SANS



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN 15 AM 10:09

4/21

Principal Place of Business

2315 N.E. 15TH STREET
POMPANO BEACH FL 33062

Mailing Address

2315 N.E. 15TH STREET
POMPANO BEACH FL 33062

2. Principal Place of Business

3208 N.E. 10TH STREET

3. Mailing Address

3208 N.E. 10TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
POMPANO BEACH, FL

City & State
POMPANO BEACH, FL

4. FEI Number **65-0948532**

Applied For

Not Applicable

Zip
33062

Country
BROWARD

Zip
33062

Country
BROWARD

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

DOBROFSKY, STEVEN R
2315 N.E. 15TH STREET
POMPANO BEACH FL 33062

Name
STEVEN R. DOBROFSKY

Street Address (P.O. Box Number is Not Acceptable)

3208 N.E. 10TH STREET

City **POMPANO BEACH, FL** Zip Code **33062**

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

REGISTERED AND LLC MANAGER
AGENT STEVEN R. DOBROFSKY

DATE

1/8/03

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
DOBROFSKY, STEVEN R
2315 N.E. 15TH STREET
POMPANO BEACH FL 33062 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGER
STEVEN R. DOBROFSKY
3208 N.E. 10TH STREET
POMAND BEACH, FL 33062 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BERKE, BENITTA
2315 N.E. 15TH STREET
POMPANO BEACH FL 33062 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGER MEMBER
BENITTA BERKE
188 W. RANDOLPH ST. SUITE 918
CHICAGO, IL 60601 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
FF \$50 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CLAS 5 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
800010138718
01/15/03--01063--017 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: **LLC MANAGER**
STEVEN R. DOBROFSKY **1/8/03**

954-782-
7849

CR2E083 (10/02)