

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000003168

1. Entity Name

LJ ENTERPRISES MANAGEMENT, LLC

Principal Place of Business

910 FIFTH AVENUE, #14-A
NEW YORK NY 10021

Mailing Address

780 NE 69TH ST., #2302
MIAMI FL 33138

2. Principal Place of Business

12555 BISCAYNE BLVD

Suite, Apt. #, etc.

#987

3. Mailing Address

12555 BISCAYNE BLVD

Suite, Apt. #, etc.

#987

City & State

N. MIAMI FL

City & State

N. MIAMI FL

Zip

33181

Country

USA

Zip

33181

Country

USA

6. Name and Address of Current Registered Agent

SENER, JAY

7080 NORTHEAST 69TH STREET, #2302
MIAMI FL 33138

7. Name and Address of New Registered Agent

Name

Jay Senter

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

12555 BISCAYNE BLVD #987

City

N. MIAMI

FL

Zip Code

33181

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

Jay Senter JAY SENTER

6/12/2003

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

500021087725

6/23/03--01113--002 **\$5.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SENER, JONAS 910 FIFTH AVENUE, #14-A NEW YORK NY 10021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SENER, JAY 780 NE 69TH ST. #2302 MIAMI FL 33138	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Lough	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RABIN-SENER Gil 250 E 73 ST New York NY 10021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JAY SENTER 12555 BISCAYNE BLVD #987 N. MIAMI FL 33181	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SENER-SAVI Leigh 2901 S. Bayshore DR #16E COCONUT GROVE FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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:

Jay Senter JAY SENTER

MGRM

6/12/2003

786
301-6008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

0031206