

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L99000004368**

1. Entity Name  
**STAMCO PROPERTIES, L.L.C.**

FILED

00 JAN 20 PM 4:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
1511 E LAKE DRIVE 1511 E LAKE DRIVE  
FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316-3205

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 **65-0942347** Applied For Not Applicable  
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

J. WALTER MCCRORY, P.A.  
1512 E BROWAR BLVD  
SUITE 200  
FT LAUDERDALE FL 33301

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME  Delete  
MGRM JAYSON, RICHARD N  
STREET ADDRESS 1511 E LAKE DRIVE  
CITY-ST-ZIP FT LAUDERDALE FL 33316

TITLE NAME  Change  Addition  
600003112376--7  
-01/27/00--01020--007  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  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: *Richard N Jayson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

1/14/00 954-525-9830  
Date Daytime Phone #