## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L99000004368

**DOCUMENT#** 

STAMCO PROPERTIES, L.L.C.

1. Entity Name

## FILED Feb 19, 2002 8:00 am Secretary of State

02-19-2002 90029 031 \*\*\*\*50.00

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	Place of Business  E LAKE DRIVE # etc.	3. Mailing Address  LSI E LAK  Suite Apt. #, etc.	CE DRIVE		- DO NOT WRITE IN	THIS SPACE			
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	AUDERDALE FL	City & State  FT LAUDE 1		4. FEI	Number 65-0942347	Applied For     Not Applicable			
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	· · · · · · · · · · · · · · · · · · ·			7. Name	and Address of Current Regi	stered Agent			
	DO NOT W	,	Name	Name J. WALTER MCCRORY					
a y jiha yakuwana	DO NOT W		Street Address (P.O. Box Number is Not Acceptable)						
	IN THIS SP	ACE		SULTE 2					
ta S			City		ud <b>ek</b> Dalf	FL Zip Code			
8. The above	named entity submits this statement fo	r the purpose of changing its	registered office or	registered agent,	or both, in the State of Florida.				
SIGNATURE .									
SIGNATORE :	Signature, typed or printed name of registered agent of	and title if applicable			T	DATE			
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		ę . C	UE BY MAY 1	9 / 5 /					
9.	MANAGING MEMBE	RS/MANAGERS		<del></del>	· 4 · . · . · . · . · . · . · . · . · .				
TITLE	MGRM	1	TITLE						
name Street address	RICHARD N. JAYSON	J E	NAME Street address						
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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:	(_	۲	Jayson	RICHARD 1	V JA-130N	2/7/0	02 954.525.9830
	PED OR	PRINTED	NAME OF SIGNING MANAGIN	IG MEMBER, MANAGER, OR AUT	THORIZED REPRESENTATIVE	Date	Daytime Phone #