

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90221 013 ****50.00

DOCUMENT # L99000004734

1. Entity Name

LEIGHT YACHTS INTERNATIONAL, L.L.C.

Principal Place of Business

**1041 S.E. 17TH ST., STE. 101
 FORT LAUDERDALE FL 33316**

Mailing Address

**1041 S.E. 17TH ST., STE. 101
 FORT LAUDERDALE FL 33316**

2. Principal Place of Business

2019 SW 20th St.

Suite, Apt. #, etc.

Suite 243

City & State

Ft. Lauderdale, FL

Zip

33315

Country

USA

3. Mailing Address

13101 Washington Blvd.

Suite, Apt. #, etc.

Suite 134

City & State

Los Angeles, CA

Zip

90066

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0937620

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

MICHAEL LEIGHT

**1041 S.E. 17TH ST., STE. 101
 FORT LAUDERDALE FL 33316**

7. Name and Address of New Registered Agent

Name

Michael Leight

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

2019 SW 20th St. #243

City

Ft. Lauderdale

FL

Zip Code

33315

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

Michael D. Leight

(NOTE: Registered Agent signature required when reinstating)

4/29/02

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
 NAME **LEIGHT, HOWARD S**
 STREET ADDRESS **707 ROYAL PLAZA DRIVE**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

10. ADDITIONS/CHANGES

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

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

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TITLE ☐ Change ☐ Addition
 NAME
 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:

Michael D. Leight

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

4/29/02

Date

Daytime Phone #

CR2E083 (9/01)