

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005428

1. Entity Name
FLORIDA INTERFACE GROUP, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 15 PM 3:13

Principal Place of Business
160 S.W. 12TH AVENUE, SUITE 102
CENTER POINTE
DEERFIELD BEACH FL 33442

Mailing Address
160 S.W. 12TH AVENUE, SUITE 102
CENTER POINTE
DEERFIELD BEACH FL 33442-3114



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For
☐ Not Applicable

APPLIED FOR

Zip

Country

Zip

Country

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

SCHAFFEL, NEIL
160 S.W. 12TH AVENUE, SUITE 102
CENTER POINTE
DEERFIELD BEACH FL 33442

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

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

BLT

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

MGRM
FLORIDA INTERFACE GROUP, INC.
160 S.W. 12TH AVENUE, SUITE 102
DEERFIELD BEACH FL 33442

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

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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:

By Neil Schaffel, Pres. Florida Interface Group, Inc.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Managing Member

Date

1/30/00 954-422-2485

Daytime Phone #

0006727 AF

CR2E083 (9/99)