

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 29 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000005612

1. Entity Name

ESSEN MARKETING, L.L.C.

Principal Place of Business

C/O THOMAS J. DAVIS, JR.
4575 VIA ROYALE, SUITE 206
FORT MYERS FL 33919

Mailing Address

C/O THOMAS J. DAVIS, JR.
4575 VIA ROYALE, SUITE 206
FORT MYERS FL 33919-1019



2. Principal Place of Business

c/o Thomas J. Davis, Jr.

3. Mailing Address

c/o Thomas J. Davis, Jr.

Suite, Apt. #, etc.

150 Alhambra Cr., Ste. 1260

Suite, Apt. #, etc.

150 Alhambra Cr., Ste. 1260

City & State

Coral Gables, FL

City & State

Coral Gables, FL

4. FEI Number

65-0947444

Applied For

Not Applicable

Zip

33134-4535

Country

USA

Zip

33134-4535

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DAVIS, THOMAS J JR.
4575 VIA ROYALE, SUITE 206
FORT MYERS FL 33919

7. Name and Address of New Registered Agent

Name
Thomas J. Davis, Jr., Attorney at Law
Street Address (P.O. Box Number is Not Acceptable)
150 Alhambra Circle
Suite 1260
City
Coral Gables, FL Zip Code
33134-4535

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 _____ DATE 4/24/00

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

9. MANAGING MEMBERS/MEMBERS

TITLE NAME MGRM ☒ Delete
DAVIS, THOMAS J JR.
STREET ADDRESS 4575 VIA ROYALE, SUITE 206
CITY- ST- ZIP FORT MYERS FL 33919

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

10. ADDITIONS/CHANGES

TITLE NAME Manager ☐ Change ☒ Addition
STREET ADDRESS Norman A. Carpenter
CITY- ST- ZIP 12403 Nacogdoches, #110
San Antonio, TX 78217

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 500003249985--2
CITY- ST- ZIP -05/12/00--01024--014
*****50.00 *****50.00

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

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

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

TITLE NAME ☐ Change ☐ Addition
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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4-25-00 (210) 599-7926
Date Daytime Phone #

CR2E083 (9/99)