

# 2000 UNIFORM BUSINESS REPORT (UBR)

0005194 AF

DOCUMENT # L99000005716

1. Entity Name  
PARAMOUNT BUILDING GROUP L.L.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAR 16 PM 3:06

Principal Place of Business  
100 WEST CYPRESS CREEK RD  
STE 700  
FT LAUDERDALE FL 33309

Mailing Address  
100 WEST CYPRESS CREEK RD  
STE 700  
FT LAUDERDALE FL 33309-2195



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  
65-0947365

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

BLODIG, GREGORY J  
100 WEST CYPRESS CREEK ROAD  
STE 700  
FT LAUDERDALE FL 33309

## 7. Name and Address of New Registered Agent

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 \_\_\_\_\_

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

## 9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME SHEEHAN, KEVIN  
STREET ADDRESS 100 WEST CYPRESS CREEK RD, STE 700  
CITY- ST- ZIP FT LAUDERDALE FL

TITLE MGR  
NAME GREENSPOON, GERALD  
STREET ADDRESS 100 WEST CYPRESS CREEK RD, STE 700  
CITY- ST- ZIP FT LAUDERDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

## 10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
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STREET ADDRESS  
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TITLE  
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: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3-13-2000

Date

Daytime Phone #

CR2E083 (9/99)