

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000006556

1. Entity Name
DACAR MANAGEMENT LLC

Principal Place of Business
334 EAST DANIA BEACH BLVD
DANIA FL

Mailing Address
334 EAST DANIA BEACH BLVD
DANIA FL

2. Principal Place of Business
DACAR MANAGEMENT, LLC.

3. Mailing Address
336 E. Dania Bch Blvd

Suite, Apt. #, etc.
336 E. Dania Bch Blvd

Suite, Apt. #, etc.

City & State
Dania, Florida

City & State
Dania, Florida

Zip
33004

Country
USA

Zip
33004

Country
USA

4. FEI Number
05-0955028

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

STANHAM, NICHOLAS
520 BRICKELL KEY DRIVE, 0-305
MIAMI FL 33131

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

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/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CARLOS GARCIA-VELEZ-MGR ☐ Change ☒ Addition
336 E. DANIA BCH BLVD
DANIA, FLORIDA 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
REGINA INC-MGR ☐ Change ☒ Addition
336 E. DANIA BCH BLVD
DANIA, FLORIDA 33004

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200003415812--9
-10/05/00-0100 Range 020 Addition
*****55.00 *****55.00

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

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

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 REQUIRED

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

Date

Daytime Phone #

CR2E083 (5/00)