

2001 UNIFORM BUSINESS REPORT (UBR)

0009698 AF

DOCUMENT # L99000006983

1. Entity Name
BSFA FINANCIAL SERVICES AND CONSULTING, L.L.C.

FILED

01 MAR 15 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
90 ALMERIA AVENUE
CORAL GABLES FL 33134

Mailing Address
1320 SOUTH DIXIE HIGHWAY
SUITE 1061
CORAL GABLES FL 33146

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0973798

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLEIN, BRENT D
801 BRICKELL AVENUE, SUITE 1901
MIAMI FL 33131

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/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
FARBISH, HOWARD J
1320 SOUTH DIXIE HIGHWAY, STE 1061
CORAL GABLES FL 33146

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MEM
SWICKOW, BERNARD 1
1320 SOUTH DIXIE HIGHWAY
CORAL GABLES FL 33146

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

500003912565-8
-03/27/01-01088-016
*****50.00 *****50.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MEM
ADLER, LESLIE 1
1320 SOUTH DIXIE HIGHWAY
CORAL GABLES FL 33146

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MEM
ALDECOA, JORGE
1320 SOUTH DIXIE HIGHWAY, SUITE 1061
CORAL GABLES FL 33134

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MEM
FARBISH, GARY
90 ALMERIA AVENUE
CORAL GABLES FL 33134

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

42

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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: HOWARD J. FARBISH, MANAGING MEMBER

1/24/01 305-665-5303

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

Date

Daytime Phone #

CR2E083 (11/00)