## 2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # L99000007183

**ELINK INVESTORS, LLC** 



## FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 92171 007 \*\*\*\*50.00

Principal Plac	e of Business	Mailing Address							
101 EAST KENNEDY BOULEVARD. SUITE 3300 TAMPA FL 33602		101 EAST KENNEDY BOULEVARD. SUITE 3300 TAMPA FL 33602		300					
						111 <b>31</b> 111 1 <b>1</b> 111 1 <b>1</b> 111 <b>3</b> 1			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4	4. FEI Number 59-	3601784	<u> </u>	oplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of Status	Desired	\$5.00 Ad Fee Require		
6. Name and Address of Current Registered Agent				7	7. Name and Address	of New Registered	Agent		
JUNG, MING G				Name					
101 EAST KENNEDY BOULEVARD, SUITE 3300 TAMPA FL 33602				Street Address (P.O. Box Number is Not Acceptable)					
LESIVI	FA FL 33002								
			City			FL_	Zip Cod	e	
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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE									
FILE NOW!!! FEE IS \$50.00									
		e to Florida		of State					
		By May 1, 2	-	oi State					
9.	MANAGING MEMBE	RS/MANAGERS	10.		AD	DITIONS/CHANGES			
TITLE	MGRM	Delete	TITLE	Mar			☐ Change	Addition	
NAME	CEA INVESTORS, INC.			Angelo	a L. Horyrit	2 1 d she 2	200		
STREET ADDRESS CITY-ST-ZIP	TO CAST MENTILEST DEVELOCITE COOL			\$ 1016.	a L. Horvit. Lennedy B Da, FL 336	11/12, Ore. 3.	,00		
	TAMPA FL 33602 MGR	П	CITY-ST-ZIP	- Tamp	oa, PC 556	<i></i>			
TITLE :	JUNG, MING	☐ Delete	TITLE NAME	ļ			☐ Change	☐ Addition	
STREET ADDRESS	101 EAST KENNEDY BLVD. SUI	TF 3300	STREET ADDRE	ss					
CITY-ST-ZIP								ľ	
TITLE	MGR	Delete	TITLE				☐ Change	Addition	
NAME	BURNS, DAVID A		NAME						
STREET ADDRESS	101 EAST KENNEDY BLVD. SUI	TE 3300	STREET ADORE	SS					
CITY-ST-ZIP	TAMPA FL 33602		CITY-ST-ZIP		<del></del>				
TITLE NAME	MGR Michaels, J. Patrick Jr	☐ Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS	101 EAST KENNEDY BLVD. SUI	IE 3300	STREET ADDRE	ss					
CITY-ST-ZIP	TAMPA FL 33602	1L 3000	CITY-ST-ZIP	~					
TITLE		□ Delete	TITLE		<u>-                                      </u>	<del></del>	☐ Change	Addition	
NAME	-		NAME				_ •	_	
STREET ADDRESS			STREET ADDRE	ss					
CITY-ST-ZIP		. <del>.</del>	, CITY-ST-ZIP			<u> </u>			
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME			NAME STREET ADORE	20					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRE	»				}	
44	autification information and the desired	Al-C- ESC	U111-31-21P	-1-1 41: 0- 1	- 110 07(0)(1) 51	0			

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:**