

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000009266

1. Entity Name

EXCALIBUR AIRE, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 16 PM 2:30

Principal Place of Business

Mailing Address

2. Principal Place of Business

14212 S.W. 136th St

3. Mailing Address

14212 S.W. 136th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL.

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

33186

Country

U.S.

Zip

33186

Country

U.S.

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Spencer Gordon

Street Address (P.O. Box Number is Not Acceptable)

14212 S.W. 136th St

City

MIAMI

FL

Zip Code

33186

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

Spencer Gordon, Spencer Gordon, Managing Ptz

3-13-00

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's 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

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MANAGING PTR
Spencer Gordon
14212 S.W. 136 ST.
MIAMI, FL. 33186

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

300003189489-3
-03/30/00--01022--018
*****50.00 *****50.00

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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:

Spencer Gordon, Spencer Gordon, Manager.

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

3/13/00

Date

305 255-3941

Daytime Phone #