

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000001403

1. Entity Name

WALL STREET MONEY MANAGEMENT GROUP FUND, LLC

Principal Place of Business

Mailing Address

2385 EXECUTIVE CENTER DR.
SUITE 100
BOCA RATON FL 33431

2385 EXECUTIVE CENTER DR.
SUITE 100
BOCA RATON FL 33431

FILED

01 JUL 20 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-1004419

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BRUNO, PETER
5361 NORTH FEDERAL HIGHWAY, SUITE 190
BOCA RATON FL 33487

Name Peter Bruno

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

2385 EXECUTIVE CENTER DRIVE

Suite #100

City Boca Raton

FL

Zip Code

33431

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

Peter Bruno Peter Bruno, Chairman

7-5-01

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
Due By September 26, 2001

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE chairman / NRM
NAME Peter Bruno
STREET ADDRESS 2385 EXECUTIVE CENTER DR. #100
CITY-ST-ZIP Boca Raton, FL 33431

☐ Delete

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STREET ADDRESS
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☐ 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.

561-962-2850

SIGNATURE:

Peter Bruno Peter Bruno, Chairman 7-5-01

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

Date

Daytime Phone #

CR2E083 (5/01)

STAPLE CHECK HERE