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2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0100000374

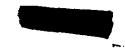
1. Entity Name

MANTA PROPERTIES, L.L.C.

MARK F. MANTA 6931 LENNOX PLACE UNIVERSITY PARK FL. 34201

MARK F. MANTA 6931 LENNOX PLACE UNIVERSITY PARK FL. 34201

FILED Feb 24, 2002 8:00 am Secretary of State 01-24-2002 90353 003 ****50.00



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	-3. Matin iy 'abo' 600						
6431 LChhux Pl	SANC		IST ma sal is ots bo vil de ilt f	1916: 60%) 90%) 96%	12414 BIDI 1661		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
UNITCES ITY PARK E		4. FEI Number	4. FEI Number 36-4125752		pplied For		
3 44 0-1 - Country	Zip	Country	5. Certificate of	Status Desired	S5.00 Ad	ditional	
6. Name and Address of Current Re	egistered Agent		7. Name and A	ddress of New Re	listered Agent		
OLSON, PAUL E		1	K-FMANTA LENNOX PLA				
1778 RINGLING BLVD. SARASOTA FL 34238			ERSITY PAR		· · ·		
				·	FL Zip Coo	le	
8. The above named entity submits this statement for the SIGNATURE Smattle. Hyped or or inted name of regulated agent and	nonter	E: Registered Agent Sgnature re	ANAG	in the State of Flori	MCM,	BCR	
	Make Check Pa	OW!!! FEE IS \$50 lyable to Departme e By May 1, 2002					
MARK F. MANTA	AGEAS	10.		ADDITIONS/C			
MARK F. MAN TA 6931 LENNOX PLACE UNIVERSITY PARK FL. 3420	□ Delete	TITLE NAME STREET ADORESS			☐ Change	☐ Addition	
CF TII NAME	☐ Delete	CITY-ST-ZIP TITLE NAME			Change	Addition	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	· • - • · · · · · · · · · · · · · · · ·	•			
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME **STREET ADDRESS			Change	Addition	
CITY-SI- ZIP		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delcte	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME CORPET ADDRESS	☐ Delete	TITLE NAME			☐ Change	☐ Addition	
11. I hereby certify that the information supplied with the indicated on this report is true and accurate and the indicated on this report is true and accurate and the indicated on this report is true and accurate.	at my signature shall have	the same legal effect a	s if made under oath; t	hat I am a managın	urther certify that the ing member or manage	nformation or of the	
SIGNATURE:	mpoyered to execute this	RED	napter 608, Florida Sta	Jum 9	413515	184	