

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 28, 2003 8:00 am**  
**Secretary of State**

03-28-2003 90001 040 \*\*\*\*\*50.00

**DOCUMENT # M01000002029**

1. Entity Name  
**PREZZO WELLINGTON, LLC**



Principal Place of Business  
**10300 W FOREST HILL BLVD  
WEST PALM BEACH FL 33414**

Mailing Address  
**1515 S FEDERAL HIGHWAY #211  
BOCA RATON FL 33432**

2. Principal Place of Business  
**10300 W. Forest Hill Blvd  
Suite, Apt. #, etc.  
122**

3. Mailing Address  
**10300 W. Forest Hill Blvd  
Suite, Apt. #, etc.  
122**

City & State  
**Wellington FL**

City & State  
**Wellington FL**

Zip  
**33414**

Country  
**USA**

Zip  
**33414**

Country  
**USA**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1109868**

Applied For  
☐ Not Applicable

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**

~~FEDDERMAN, SUSAN  
1515 S FEDERAL HIGHWAY #211  
BOCA RATON FL 33432~~

Name **Prezzo Wellington**  
Street Address (P.O. Box Number is Not Acceptable)  
**10300 W. Forest Hill Blvd #122**  
City **Wellington** FL Zip Code **33414**

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 **Richard Hurd G.M.**

**3-21-03**

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 Florida Department of State**  
**Due By May 1, 2003**

**9. MANAGING MEMBERS/MANAGERS**

**10. ADDITIONS/CHANGES**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
GREWAL, NAROTAM S  
28 CEDAR ROAD  
NORTH HAMPTON NH 03862** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**G.M.  
Richard Hurd  
10300 W Forest Hill Blvd  
Wellington FL 33414** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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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: **Richard Hurd G.M.**

**3-21-03**

**561-333-1030**

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

Date

Daytime Phone #

CR2E083 (10/02)