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

DOCUMENT # M OQ 000002705

1. Entity Name

A.M. F. CAPITAL, LLC



FILED Apr 13, 2004 8:00 am Secretary of State 04-13-2004 90332 044 ****50.00

DO NOT WRITE IN THIS SPACE					24040507		
		3. Mailing Address	. Mailing Address				
99 WOODBURY ROAD		99 WOODBURY KOAD		DO NOT WRITE IN THIS SPACE			
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			1	THIS SPACE	
City & State		City & State		4. FEI Number	Applied For		
Zip Country		Zip Country		81-0559929	Not Applicable \$5.00 Additional		
1180		11801		SA-	5. Certificate of Status Desired	Fee Required	
nin, regist var ediner is en grant i grant			Marine A		7. Name and Address of Current Regis	stered Agent	
DO NOT WRITE				Name JOHN MARIN			
			Street Address (P.O. Box Number is Not Acceptable) I SLAND ESTATES FARKWAY		
ar Archite to the Architecture of the Architec	IN THIS SP	ACE		40	TOLBAD COINTED TAIGE	-port /	
er distribution (%) es production (%)				City 🔿		Zip Code	
				TALA	M COAST	FL 32135	
	named entity submits this statement fo ons of registered agent.	r the purpose of changing its	s registered o	office or register	red agent, or both, in the State of Florida.	I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.							
	Signature, typed or primed name or registered agent of		FEE IS \$5	:0 00		<u></u>	
		Make Check Payal	TO THE REPORT OF THE PARTY OF T	da Departme	ent of State		
9.	MANAGING MEMBE	RS/MANAGERS					
TITLE	MGRM		TITLE		 A Control of the Contro		
NAME STREET ADDRESS	LIPPOLIS, ALLAN A. 6 GREENBRIAR LANE		NAME STREET A	A STATE OF THE PARTY OF THE PAR			
CITY-ST-ZIP	DIX HILLS, NY 1174	¹ 6	CITY-ST-	ZIP.			
TITLE	MG RM		mle \	NEW STATES			
NAME	LANZARO, THOMAS (S.	NAME	poproe			
STREET ADDRESS CITY-ST-ZIP	LANZARO, THOMAS (IT BARRINGTON PL MELVILLE NY 1174	4CE. 1	STREET A				
TITLE	MGRM -		TITLE	Commence of the commence of th			
NAME	SHAPIRO, STANLLY 2 RAWLINGS DRIVE		NAME				
STREET ADDRESS			467.774.67	TADDRESS DO NOT WRITE			
CITY-ST-ZIP	1.(LL. 1/LLC , /11 - 11 1-1 - #		CITY-ST TITLE				
TITLE NAME	MORM		NAME	g references	IN THIS SP	ACE	
STREET ADDRESS	I WRIEHT DEWL		STREET A	ODRESS			
CITY-ST-ZIP	MARIN, JOHN I WRIGHT DRIVE DIX HILLS, NY 1176	tb.	CITY-ST	- 21P			
TITLE	MGRM,	,	TITLE	1862 3 8 99 138			
NAME	FEIN, HOWARD J	,	NAME STREET A	onoree L			
STREET ADDRESS CITY-ST-ZIP	MGRM FEIN, HOWARD J 10 WINDERMERE WAY WOODBURY, NY 117	0 h	GITY-ST	2、12次2.2.2.2.2.2.2.1.4.4.4.4.4.1.2.2.2.2.2.2.			
TITLE	MGRM	70	TITLE				
NAME			NAME				
STREET ADDRESS	AZUS, SAMUEL J 2767 MAE COURT		2000	VDDRESS	 All the control of the		
CITY-ST-ZIP	BELLMORE NY 1171	0	CITY-ST	A Statelling of the State of States		or cortify that the information	
indicated	certify that the information supplied with on this report is true and accurate and bility company or the ecciver or trusts	l that my signature shall haw	e the same le	egal effect as it r	ection 119.07(3)(i), Florida Statutes. I furth made under oath; that I am a managing r oter 608, Florida Statutes.	nember or manager of the	

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