## **2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # M9600000049

1. Entity Name

EDENWALD ASSOCIATES I.I.C.



## FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90572 008 \*\*\*\*50.00

Daytime Phone #

Zip Country Zip Country S. Certificate of Status Desired S5.00 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent	LULIVIVA	LD ASSOCIATES, E.E.G.			7
## Applied For Carry A State    2. Principal Page of Business   2. Mailing Address   3. Maili	Principal Plac	e of Business	Mailing Address		
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Rot	Suite, Apt. #, etc.		Suite, Apt. #, etc.	** · · · ·	CHECK HERE IF MAKING CHANGES
Country Zip Country S. Certificate of Status Desired S. S. 00 Additional Fee Required  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  SCHUR, ROBERT ESO. \$250 N. KENDALL DRIVE CORAL GABLES FL 33158  City FL Zip Code  City FL Zip Code  City FL Zip Code  SIGNATURE  THE NOW!!! FEE IS \$50.00  Make Check Payable to Floridad Department of State Due By May 1, 2003  9. MANAGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES  STRET ADDRESS  STRET ADDRESS  CITY-ST-2P  BRONX NY 10458  Delate  THE NAME STRET ADDRESS  CITY-ST-2P  THE NAME	City & State		City & State		10 001 0401
SCHUR, ROBERT ESO. \$250 N. KENDALL DRIVE CORAL GABLES FL 33156  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. (am familiar with, and accellable)  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 3/REF ADDRESS 3/REF	Zip	Country	Zip	Country .	5 Certificate of Status Desired 55.00 Additional
SCHUR, ROBERT ESO.  \$250 N. KENDALL DRIVE CORAL GABLES FL 33156   City FL Zip Code  6. The above named entry 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 acce the obligations of registered agent.  SIGNATURE  SIGN		6. Name and Address of Curre	nt Registered Agent		·
S250 N. KENDALL DRIVE CORAL GABLES FL 33156  City FL Zip Code  City Adactive agroups agroups requised agent, or both, in the State of Florida. I am familiar with, and acce  City FL C	001	UD DODERT COO		Name	
E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelerate the obligations of registered agent.    Signature	5250	0 N. KENDALL DRIVE		Street Address	(P.O. Box Number is Not Acceptable)
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelerate the obligations of registered agent.    Signature   Si	COF	AL GABLES FL 33156			
the obligations of registered agent.    SIGNATURE				City	FL Zip Code
SIGNATURE    Signature hyped or promet name or registared agent and life if applicable. (NOTE: Registered Agent alignature required when variatating)   DATE	8. The above	named entity submits this statement	for the purpose of changing	its registered office or regist	ered agent, or both, in the State of Florida. I am familiar with, and accept
### Signature. hyber of printed name of registered agent and alle if applicable.  ### FILE NOW!!! FEE IS \$5.00.  ### Make Check Payable to Florida Department of State Due By May 1, 2003  ### MANAGING MEMBERS / MANAGERS  ### MANAGING MEMBERS / MANAGERS  ### MANAGERS	the obligati	ons or registered agent.			
MAKE Check Payable to Florida Department of State Due By May 1, 2003  MANAGING MEMBERS / MANAGERS  TITLE MANAR ROSENBLUM, MICHAEL 2432 GRAND CONCOURSE BRONX NY 10458  TITLE MANAR STREET ADDRESS CITY-ST-2IP	SIGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable. (N	IOTE: Registered Agent signature requir	ed when reinstating) DATE
MAKE Check Payable to Florida Department of State Due By May 1, 2003  MANAGING MEMBERS / MANAGERS  TITLE MARME ROSENBLUM, MICHAEL 2432 GRAND CONCOURSE BRONX NY 10458  TITLE NAME SIREET ADDRESS CITY-ST-ZIP  TITLE N			FILE	NOW!!! FEE IS \$50.00	
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