2000 UNIFORM BUSINESS REPORT (UBR)

ייי	MENIT # MACTO	00000010		7 . :		•		
1. Entity Nam	MENT # M97 0	, ,	FILED					
JAY HARI	RIS, L.L.C.			60.1	N 25 PM 3	. ၃		
		···	·					
Principal Place of Business 550 SOUTH OCEAN BLVD., APT. 2203 BOCA RATON FL 33432		Mailing Address 550 SOUTH OCEAN BLVD., APT. 2203 BOCA RATON FL 33432-6286		SECR TALLA	ETARY OF ST HASSEE, FLO	IATE ORIDA		
2. Principal P	lace of Business	3. Mailing Address		1 188/8611 (16 1811)	188% 86% 88% 58% 68	in Be in Be in 1981		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number	 0737278	1 1 '	oplied For مراجع الليونيات	
Zip Country		Zip	Country	5. Certificate of Status		\$5.00 Additional		
	6. Name and Address of Curren	t Registered Agent		7. Name and Addres	s of New Registere		-	
			Name				. سو د د	
HARRIS, J	IAY TH OCEAN BLVD., APT. 2203	·	Street Address	s (P.O. Box Number is Not	Acceptable)			
	TON FL 33432					•		
			City		F	Zip Code	е	
8. The above	named entity submits this statement f	or the purpose of changing it	s registered office or regist	ered agent, or both, in the	State of Florida.			
SIGNATURE .	Signature, typed or printed name of registered ager	t and title if annicable (NO	TE: Registered Agent signature requir	red when reinstating)	DATE	<u>-</u>		
	Signators, typed or printed flame or registered again		 					
	·	E .	OW!!! FEE IS \$50.00 ayable to Department					
	MANIA CINIC MENT	DEDC/MEMBERS			DDITIONS/CHANG			
9. TITLE	MANAGING MEMI	Delsta	TITLE	^	DDITIONS/CHANG	Change	Addition	
NAME	HARRIS, JAY		NAME	800	00311	1898	: <u>-</u> -9	
STREET ADDRESS 550 SOUTH OCEAN BLVD., APT. 2203		Г. 2203	STREET ADDRESS		-01/26/0001112008 *****55.00 *****55.00			
CITY- 81- ZIP	BOCA RATON FL 33432		CITY-ST-ZIP		***************************************	Change	<u></u>	
TITLE			NAME			C Anenãe		
STREET ADDRESS	,	•	STREET ADDRESS		-سد.	-		
GITY-8T-ZIP			CITY-8T-ZIP		_			
TITLE Name	وللمناوس فليستان المادي ووارو	☐ Deleto Deleto	TITLE	- •	a " will stake	Change	Addition	
STREET ADDRESS		•	STREET ADDRESS		•			
CITY- ST-ZIP			CATY- 8T- ZEP			_	_	
TITLE	,	☐ Deleta	TITLE NAME			Change	Addition	
NAME STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			GITY-81-ZIP				_	
TITLE		Deleta .	TITLE			Change	Addition	
NAME STBEET ADDRESS			MAME STREET ADDRESS	,				
CITY-8T-ZIP	۸.		CITY- 81- ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ÅBDRESS			NAME Street Address					
CITY-ST-ZIP		•	CITY-81-Z(P					
11. hereby c	certify that the information supplied wit	h this filing does not qualify for	or the exemption stated in S	Section 119.07(3)(i), Florid	a Statutes. I further o	certify that the in	nformation	
indicated limited lia	on this report is true and accurate an bility company of the receiver or trus	a that my signature shall have se empowered to execute this	e the same legal effect as if size of the control o	mage unger oath; that I a ipter 608, Florida Statutes.	m a managing men	iber or manage	(
	- Camerala	Vii i i i i i i i i i i i i i i i i i i	17 1 market	1 21 25 10	/udas	200	201	
SIGNAT		7671-66	THEY DO	MAKK I	MANON !	281-5	180	
	SIGNATURE AND TYPED OR PR	IINTED NAME OF SIGNING MANAGING	MEMBER OR MANAGER	Date	,	Daytime Phone #	,	