

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90581 002 ****55.00

DOCUMENT # M97000000847

1. Entity Name

SUGARLAND BUSINESS CENTER L.L.C.

Principal Place of Business

**560 HERNDON PARKWAY, SUITE 200
 HERNDON VA 22070**

Mailing Address

**1350 E. NEWPORT CENTER DR., STE. 206
 DEERFIELD BEACH FL 33442**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

54-1749883

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

**TAURUS INVESTMENT GROUP, INC.
 ATTN: LINDA KASSOF
 1350 E. NEWPORT CENTER DR., STE. 206
 DEERFIELD BEACH FL 33442**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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 Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 VOELKEL, MARKUS
 HOCHSTR. 12
 WILICH-SCHIEFBahn, GERMANY** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 LINDA G. KASSOF
 1350 E NEWPORT CENTER DR., STE. 206
 DEERFIELD BEACH FL 33442** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 ACKERMANS-MEYOEN, UTA
 HOCHSTR. 12
 WILICH-SCHIEFBahn, GERMANY** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 GUENTHER, REIBLING
 1350 E. NEWPORT CENTER DR., STE. 206
 DEERFIELD BEACH FL 33442** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 RILEY, RODNEY
 100 S. ORANGE AVE., STE. 410
 ORLANDO FL 32801** ☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 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:

Linda G. Kassof
 LINDA G. KASSOF

4-25-02 954-428-458

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

Date

Daytime Phone #

CR2E083 (9/01)