

2002 UNIFORM BUSINESS REPORT (UBR)

\$50.00

0007415

DOCUMENT # M99000000582

1. Entity Name

M O'CONNOR LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY -2 PM 4:02

Principal Place of Business

3225 AVIATION AVENUE, 4TH FLOOR
MIAMI FL 33133

Mailing Address

3225 AVIATION AVENUE, 4TH FLOOR
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

ONE PENNSYLVANIA PLAZA

Suite, Apt. #, etc.

SUITE 4400

3. Mailing Address

ONE PENNSYLVANIA PLAZA

Suite, Apt. #, etc.

SUITE 4400

City & State

NEW YORK, NY

City & State

NEW YORK, NY

Zip

10119

Country

Zip

10119

Country

4. FEI Number

65-0906543

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
1406 HAYS STREET, SUITE #2
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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

500005431395--7
-05/02/02--01063--011
1376.25 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	MORTON, THOMAS A.R.	
STREET ADDRESS	3225 AVIATION AVE., 4TH FLOOR	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	PASSAGE, STEPHEN S	
STREET ADDRESS	800 THIRD AVE., 38TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	MURPHY, THOMAS	
STREET ADDRESS	800 THIRD AVENUE, 38TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	YOON CHAE	
STREET ADDRESS	800 THIRD AVENUE, 38TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	SKOPP, FREDRIC M	
STREET ADDRESS	3225 AVIATION AVENUE, 4TH FLOOR	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	NEU, CHRIS	
STREET ADDRESS	800 THIRD AVENUE, 38TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10022	

10. ADDITIONS/CHANGES

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORTON, THOMAS A.R.	
STREET ADDRESS	6990 NW 97 AVENUE	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PASSAGE, STEPHEN S	
STREET ADDRESS	ONE PENNSYLVANIA PLAZA, SUITE 4400	
CITY-ST-ZIP	NEW YORK, NY 10119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, THOMAS	
STREET ADDRESS	ONE PENNSYLVANIA PLAZA, SUITE 4400	
CITY-ST-ZIP	NEW YORK, NY 10119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOON CHAE	
STREET ADDRESS	ONE PENNSYLVANIA PLAZA, SUITE 4400	
CITY-ST-ZIP	NEW YORK, NY 10119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SKOPP, FREDRIC M.	
STREET ADDRESS	6990 NW 97 AVENUE	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEU, CHRIS	
STREET ADDRESS	ONE PENNSYLVANIA PLAZA, SUITE 4400	
CITY-ST-ZIP	NEW YORK, NY 10119	

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:

SIGNATURE: [Signature]

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

Date

02-15-02

Daytime Phone #

(305) 418-3185

CR2E083 (9/01)