

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000000894

1. Entity Name

BARRY KAYE MANAGEMENT COMPANY, L.L.C.

FILED

00 APR 10 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

C/O FOGEL & COHEN
2499 GLADES ROAD, SUITE 105
BOCA RATON FL 33431

Mailing Address

1901 AVENUE OF THE STARS, SUITE 500
LOS ANGELES CA 90067-6007

2. Principal Place of Business

5100 Town Center Circle

Suite, Apt. #, etc.

Boca Center, Tower II, Ste 440

City & State
Boca Raton, Florida

Zip
33486

Country
U.S.A.

3. Mailing Address

5100 Town Center Circle

Suite, Apt. #, etc.

Boca Center, Tower II, Ste 440

City & State
Boca Raton, Florida

Zip
33486

Country
U.S.A.

4. FEI Number

65-0950175

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

9. MANAGING MEMBERS / MEMBERS

TITLE MGRM ☐ Delete
NAME KAYE, BARRY
STREET ADDRESS 1901 AVENUE OF THE STARS, SUITE 500
CITY-ST-ZIP LOS ANGELES CA 90067

TITLE MBR ☐ Delete
NAME KAYE, CAROLE
STREET ADDRESS 1901 AVENUE OF THE STARS, SUITE 500
CITY-ST-ZIP LOS ANGELES CA 90067

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME Kaye, Barry
STREET ADDRESS 5100 Town Center Circle, Suite 440
CITY-ST-ZIP Boca Raton, Florida 33486

TITLE MBR ☒ Change ☐ Addition
NAME Kaye, Barry
STREET ADDRESS 5100 Town Center Circle, Suite 440
CITY-ST-ZIP Boca Raton, Florida 33486

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

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/7/00

(561) 417-5883

Date

Daytime Phone #

CR2E083 (9/99)