

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

DOCUMENT # M99000001365

1. Entity Name
FLAGSHIP ASSOCIATES L.L.C.

00 JUN-5-AM 10:06

Principal Place of Business
20100 HIGHLAND LAKES BLVD.
MIAMI FL 33179

Mailing Address
20100 HIGHLAND LAKES BLVD.
MIAMI FL 33179-2814

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
998 NE 167 STREET
Suite, Apt. #, etc.

3. Mailing Address
998 NE 167 ST
Suite, Apt. #, etc.

City & State
MIAMI, FL
Zip 33162 Country USA

City & State
MIAMI, FL
Zip 33162 Country USA

4. FEI Number 88-0434897
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KALAM, SHAHAB
20100 HIGHLAND LAKES BLVD.
MIAMI FL 33179

7. Name and Address of New Registered Agent

Name KALAM, SHAHAB
Street Address (P.O. Box Number is Not Acceptable)
998 NE 167 Street
City MIAMI FL Zip Code 33162

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]* (NOTE: Registered Agent signature required when reinstating) DATE 6-1-2000

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KALAM, SHAHAB 20100 HIGHLAND LAKES BLVD. MIAMI FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500003342985--8 -08/02/00--01003--014 *****50.00	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AMIKALI, ARIE A 801 NE 167 STREET #310 N. MIAMI FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AMIRALI, ARIF A 998 NE 167 ST MIAMI, FL 33162	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAUS, ISABEL 1164 NE 209 TERR. MIAMI FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAOS, ISABEL 1164 NE 209 TER MIAMI, FL 33179	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JANGBAHADOOR, ADAISH 1870 NE 199 STREET MIAMI FL 33179	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME 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: *[Signature]* DATE 6-1-2000 DAYTIME PHONE # 305 354 3800

CR2E083 (9/99)