2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000002250

1. Entity Name MIAMI RIVER ASSOCIATES, LLC

Principal Place of Business

155 SOUTH MIAMI AVENUE, PH-IIA MIAMI, FL 33130

Mailing Address

155 SOUTH MIAMI AVENUE, PH-IIA MIAMI, FL 33130

FILED Apr 29, 2004 08:00 AM Secretary of State



01122004 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number					
	65- <u>1113497</u>					

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

1201 HAYS STREET TALLAHASSEE, FL 32301-2525		IN THIS SPACE		
	e named entity submits this statement for the purpose of chattons of registered agent.	inging its registere	ed office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered	Agent signature required when reinstating)	DATE
F	filing Fee is \$50,00 Due by May 1, 2004			
9. TILLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33130			16/30/30(44/45) 34/36/34-93(94-93)
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP				NOT WRITE THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS GITY-ST-ZIP	<u> </u>	qualify for the owner.	motion stated in Section 110 02/2)	(A Florida Statidae Liuribae conta libet the information
indicated limited to	certify that the information supplied with this filing does not of d on this report is true and accurate and that my signature shability company or the receiver or trustee ampolyered to exec	nall have the same cute this report as	legal effect as if made under oath required by Chapter 608, Florida	n, that I am a managing member or manager of the Statutes.