## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L01000012877**

1. Entity Name

ARLA PROPERTIES, LLC



FILED
Jan 15, 2004 08:00 AM
Secretary of State

Principal Place of Business

5898 N.W. 25TH COURT BOCA RATON, FL 33496 Mailing Address

5898 N.W. 25TH COURT BOCA RATON, FL 33496



01122004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1133445 |Applied For |Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOPTA, ANDREW J 5898 NW 25TH CT BOCA RATON, FL 33496

## DO NOT WRITE IN THIS SPACE

		HY	HIIO OFACE	
	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bo	oth, In the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if appricable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
F D	iling Fee is \$50.00 ue by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOPTA, ANDREW J 5898 N.W. 25TH COURT BOCA RATON, FL 33496		U09000005268 01/15/04-80046-022 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOPTA, ROBERT 5898 N.W. 25TH COURT BOCA RATON, FL 33496			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOPTA, ANDREW J JR 5898 N.W. 25TH COURT BOCA RATON, FL 33496	DO	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZEP				
TITLE				

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

STREET ADDRESS CITY-ST-ZIP

Andrew V. Hopti

1-12-04

.561-999-8798

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING NEMBER, OR AUTHORIZED REPRESENTATIVE

Cate

Davtime Phone #