


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000013916 1. Entity Name CHIMI PROPERTIES, L.L.C.	
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Principal Place of Business 254 BOMBAY AVE. LAUDERDALE-BY-THE-SEA, FL 33308	Mailing Address 254 BOMBAY AVE. LAUDERDALE-BY-THE-SEA, FL 33308
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DO NOT WRITE IN THIS SPACE



04042005 No Chg-LLC	CR2E083 (10/03)
4. FEI Number 65-1154726	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent NATHAN, RANDY J C/O FRANK, WEINBERG & BLACK, P.L. 7805 S.W. 6TH COURT PLANTATION, FL 33324
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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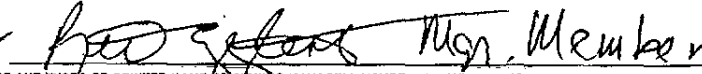
Filing Fee is \$50.00
Due by May 1, 2005

U00000292673
 04/07/05-80080-010 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGGLESTON, HARRY II 254 BOMBAY AVE FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGGLESTON, RITA T 254 BOMBAY AVE FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGGLESTON, HARRY III 254 BOMBAY AVE FORT LAUDERDALE, FL 33-301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: 	Date: 4-4-05
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>