

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010209

Entity Name: SFD @ HOLLYWOOD, LLC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

2901 SW 8 STREET, SUITE 204
MIAMI, FL 33135

New Principal Place of Business:

1200 PONCE DE LEON
FIRST FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2901 SW 8 STREET, SUITE 204
MIAMI, FL 33135

New Mailing Address:

1200 PONCE DE LEON
FIRST FLOOR
CORAL GABLES, FL 33134

FEI Number: 03-0441873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, PEDRO A
1221 BRICKELL AVENUE, SUITE 2100
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ABELE, CHARLES R JR.
Address: 2901 SW 8 STREET, SUITE 204
City-St-Zip: MIAMI, FL 33135

Title: MGR () Delete
Name: BOSCHETTI, JOSE R
Address: 2901 SW 8 STREET, SUITE 204
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ABELE, CHARLES R JR.
Address: 1200 PONCE DE LEON, 1ST FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change () Addition
Name: BOSCHETTI, JOSE R
Address: 1200 PONCE DE LEON, 1ST FLOOR
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOSE BOSCHETTI

MGR

04/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date