

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 19, 2005 8:00 am**  
**Secretary of State**

04-19-2005 90022 006 \*\*\*150.00

DOCUMENT # L03000001567

1. Entity Name  
ROCA REAL ESTATE, LLC



Principal Place of Business  
1450 WEST COPANS ROAD  
POMPAÑO BEACH, FL 33064

Mailing Address  
1450 WEST COPANS ROAD  
POMPAÑO BEACH, FL 33064

20037993



2. Principal Place of Business

2950 N. ANDREWS AVE. EXT.

Suite, Apt. #, etc.  
SUITE # 120

City & State  
POMPAÑO BEACH, FL

Zip Country  
33064 USA

3. Mailing Address

2950 N. ANDREWS AVE. EXT.

Suite, Apt. #, etc.  
SUITE # 120

City & State  
POMPAÑO BEACH, FL

Zip Country  
33064 USA

04132005 Chg-LLC CR2E083 (10/03)

4. FEI Number

55-0814361

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HAGEN & HAGEN, P.A.  
3531 GRIFFIN ROAD  
FT LAUDERDALE, FL 33312

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

*[Signature]*

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2005

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE P  
NAME ESQUENAZI, ROBERTO  
STREET ADDRESS 1450 W COPANS RD  
CITY-ST-ZIP POMPAÑO BEACH, FL 33064 ☐ Delete

TITLE S  
NAME ESQUENAZI, CAROL  
STREET ADDRESS 1450 W COPANS ROAD  
CITY-ST-ZIP POMPAÑO BEACH, FL 33064 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS CHANGES

TITLE P  
NAME ESQUENAZI ROBERTO  
STREET ADDRESS 2950 N. ANDREWS AVE. EXT. SUITE #120  
CITY-ST-ZIP POMPAÑO BEACH FL 33064 ☒ Change ☐ Addition

TITLE S  
NAME ESQUENAZI CAROL  
STREET ADDRESS 2950 N. ANDREWS AVE. EXT. STE. # 120  
CITY-ST-ZIP POMPAÑO BEACH FL 33064 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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]* CAROL ESQUENAZI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-12-05

Date

954.916.3634

Daytime Phone #