

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012891

FILED  
Mar 30, 2004  
Secretary of State

Entity Name: BIRD AVENUE HOLDINGS, L.L.C.

## Current Principal Place of Business:

285 SEVILLA AVE. 2ND FLOOR  
CORAL GABLES, FL 33134

## New Principal Place of Business:

7150 NW 36 AVENUE  
MIAMI, FL 33147

## Current Mailing Address:

285 SEVILLA AVE. 2ND FLOOR  
CORAL GABLES, FL 33134

## New Mailing Address:

7150 NW 36 AVNUE  
MIAMI, FL 33147

FEI Number: 11-3686804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, RALPH  
285 SEVILLA AVE. 2ND FLOOR  
CORAL GABLES, FL 33134

## Name and Address of New Registered Agent:

ARCIA, PAUL  
7150 NW 36 AVENUE  
MIAMI, FL 33147

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: PAUL ARCIA

03/30/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ARCIA, PAUL MGR  
Address: 7150 NW 36 AVENUE  
City-St-Zip: MIAMI, FL 33147

Title: MGR ( ) Change (X) Addition  
Name: RAMIREZ, RALPH MGR  
Address: 285 SEVILLA AVE., 2ND 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: PAUL ARCIA

MGR

03/30/2004

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