

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020162

**FILED**  
**Apr 26, 2004**  
**Secretary of State**

**Entity Name:** 4300 COLLINS AVENUE, L.L.C.

**Current Principal Place of Business:**

1717 N. BAYSHORE DR., STE. 102  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

1717 N. BAYSHORE DR., STE. 102  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 16-1669769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEDARD, DENNIS R  
1717 N. BAYSHORE DR., STE. 102  
MIAMI, FL 33132

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: GINO, FALSETTO  
Address: 1717 NO BAYSHORE DR., #102  
City-St-Zip: MIAMI, FL 33132

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: GINO FALSETTO

MGRM

04/26/2004

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