

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026527

FILED  
Jun 07, 2005  
Secretary of State

Entity Name: SUN BREEZE PROPERTIES, LLC

**Current Principal Place of Business:**

16799 SW 16TH STREET  
PEMBROKE PINES, FL 33027

**New Principal Place of Business:**

**Current Mailing Address:**

16799 SW 16TH STREET  
PEMBROKE PINES, FL 33027

**New Mailing Address:**

FEI Number: 20-1096846      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MENDEZ, ARSENIO  
16799 SW 16TH STREET  
PEMBROKE PINES, FL 33027      US

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/MANAGERS:**

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

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

**ADDITIONS/CHANGES:**

Title: MMGR ( ) Change (X) Addition  
Name: MENDEZ, ARSENIO  
Address: 16799 SW 16TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: MMGR ( ) Change (X) Addition  
Name: SERA, CRISTINO  
Address: 9737 NW 41 STREET #206  
City-St-Zip: DORAL, FL 33178

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: ARSENIO MENDEZ

MMGR

06/07/2005

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