


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2005 08:00 AM
Secretary of State

DOCUMENT # L95000000393
 1. Entity Name
 1616 ASSOCIATES, L.C.



Principal Place of Business 2958 SW 12TH STREET DEERFIELD BEACH, FL 33442	Mailing Address % A. WEBER 2525 PALMER AVE NEW ROCHELLE, NY 10801
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03172005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0574976	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NEWMARK, LESLIE
 6010 NW 23RD TERRAC
 BOCA RATON, FL 33496

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WEBER, GARY 1250 SO. MILITARY TRAIL APT. 1616 DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WEBER, ALLEN 2525 PALMER AVENUE NEW ROCHELLE, NY 10801
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 03/31/05-80051-017 50.00

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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: Allen Weber 3/25/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #