2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:)

SIGNATURE AM

Jan 23, 2004 08:00 AM Secretary of State DOCUMENT # L9900001350 SHOPPES OF BLUE LAKE, LLC Mailing Address Principal Place of Business 943 CLINT MOORE ROAD 943 CLINT MOORE ROAD BOCA RATON, FL 33487 BOCA RATON, FL 33487 01072004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4 FEL Number Applied For 65-0902322 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HEISE, MARTIN P DO NOT WRITE 943 CLINT MOORE ROAD BOCA RATON, FL 33487 IN THIS SPACE pose of changing its registered office or registered agent, or both, in the State of Florida I am familiar with, and accept 8. The above named the obligations of -20-04 SIGNATURE. (NOTE Registered Agent signature regulred when reinstating Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE BERSON, GERALD S NAME STREET ADDRESS 943 CLINT MOORE ROAD CITY-ST-ZIP BOCA RATON, FL 33487 MGRM TITLE UNQQQNG1 1571 HEISE, MARTIN P NAME 01/23/04-90042-024 SO.no STREET ADDRESS 943 CLINT MOORE ROAD CMY-ST-ZIP BOCA RATON, FL 33487 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-\$T-ZIP TITLE IN THIS SPACE MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP upplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information countrie and that in Signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the very crustee employed to execute this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the information indicated on this report is true an limited liability company or the

MANAGING MEMBEY, OR AUTHORIZED REPRESENTATIVE

FILED

Daylime Phone #