


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 24, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L00000002974

1. Entity Name  
 S. GIMBEL LLC



Principal Place of Business  
 10155 COLLINS AVENUE, PENTHOUSE 7  
 BAL HARBOUR, FL 33154

Mailing Address  
 10155 COLLINS AVENUE, PENTHOUSE 7  
 BAL HARBOUR, FL 33154

**DO NOT WRITE IN THIS SPACE**



01242004No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1095252	Applied For Not Applicable
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5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GIMBEL, SIDNEY  
 10155 COLLINS AVE, PH-7  
 BAL HARBOUR, FL 33154

**DO NOT WRITE IN THIS SPACE**

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, 2004**

U00000035618  
 03/24/04-80040-020 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GIMBEL, SIDNEY 10155 COLLINS AVENUE, PENTHOUSE 7 BAL HARBOUR, FL 33154
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Sidney Gimbel 3/24/04  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #