

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031759

Entity Name: FARM PROPERTIES, LLC.

FILED  
Apr 22, 2004  
Secretary of State

## Current Principal Place of Business:

8770 S.W. 72 STREET  
#363  
MIAMI, FL 33173 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 110067  
HIALEAH, FL 330110067 US

## New Mailing Address:

FEI Number: 32-0050829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PICO, PATRICIA A  
8770 S.W. 72 STREET  
#363  
MIAMI, FL 33173 US

## Name and Address of New Registered Agent:

PICO, MARTIN  
8770 S.W. 72 STREET  
#363  
MIAMI, FL 33173 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: MARTIN PICO

04/22/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: PICO, PATRICIA A  
Address: 8770 S.W. 72 STREET  
City-St-Zip: MIAMI, FL 33173

Title: MGR ( ) Delete  
Name: PICO, MARTIN  
Address: 8770 SW 72 STREET  
City-St-Zip: MIAMI, FL 33173 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PICO, PATRICIA A  
Address: 8770 S.W. 72 STREET #363  
City-St-Zip: MIAMI, FL 33173

Title: MGR (X) Change ( ) Addition  
Name: PICO, MARTIN  
Address: 8770 SW 72 STREET # 363  
City-St-Zip: MIAMI, FL 33173 US

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: MARTIN PICO

MGR

04/22/2004

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