

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90081 019 ****50.00

DOCUMENT # L02000019341 1. Entity Name OFFICE PROFESSIONAL PLAZA, LLC	
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Principal Place of Business 1820 N. CORPORATE LAKE BLVD. SUITE 202 206 WESTON, FL 33326	Mailing Address 1820 N. CORPORATE LAKE BLVD. SUITE 202 206 WESTON, FL 33326
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04252005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 55-0793779	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LORENZO, JOSE ENRIQUE
833 REGAL COVE RD.
WESTON, FL 33327**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ACECON CONSTRUCTION, CORP. 1820 N. CORPORATE LAKE BLVD. SUITE 202 WESTON, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR L & L CONSULTANTS & INVESTMENT, CORP. 833 REGAL COVE RD. WESTON, FL 33327
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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)(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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04/22/2005

Date

9542178616

Daytime Phone #