### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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### DOCUMENT # L06000054110

1. Entity Name

PARK WEST MIAMI 44 LLC



Principal Place of Business

Mailing Address

5119 ARTESA WAY WEST

PALM BEACH GARDENS, FL 33418 U

P.O. BOX 9200 JUPITER, FL 33468

## FILED Apr 30, 2008 8:00 am Secretary of State

04-30-2008 90028 027 \*\*\*138.75

50005524



04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4940112

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MR 44 RA LLC 55119 ARTESA WAYWEST PALM BEACH GARDENS, FL 33418

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the oblic	ove named entity submits this statement for the purpose of chargations of registered agent.	anging its registered office or registered agent, or both, in the Si	ate of Florida. I am familiar with, and accep
SiGNATUR	E		
100	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	LE NOW!!! FEE IS \$138.75 ay 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		

#### PARK WEST MIAMI 44B LLC STREET ADDRESS 5119 ARTESA WAY WEST CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:	M		Marc Roberts	4129100	(361)622-764
SIGNATURE AND TY	ED OR PRINTED NAME OF SUNING	MANAGING MEMBER, OR AUTHO	RIZED REPRESENTATIVE	Date	Daytime Phone #