


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000000061 1. Entity Name DACRA POWER PLANT VILLAGE LLC	
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Principal Place of Business 1632 PENNSYLVANIA AVE. 2ND FLOOR MIAMI BEACH, FL 33139	Mailing Address 1632 PENNSYLVANIA AVE. 2ND FLOOR MIAMI BEACH, FL 33139
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01252005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0987872	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ROBINS, CRAIG 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
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**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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DACRA POWER PLANT VILLAGE INC. 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROBINS, CRAIG 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
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04/21/05-80102-003 50.00

**DO NOT WRITE
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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.

DACRA POWER PLANT VILLAGE, LLC.

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

V.P. 3/11/05 (305) 531-8700
Date Daytime Phone #