## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE AND TYPED OR PRINTED NAME

## Mar 09, 2004 8:00 am DOCUMENT # L00000001042 **Secretary of State** 1. Entity Name 03-09-2004 90290 036 \*\*\*\*55.00 LAS OLAS YACHT CLUB, LLC Principal Place of Business Mailing Address 2828 CORAL WAY, PENTHOUSE ONE COOTHE RELATED GROUP OF FLORID 2828 CORAL WAY, PENTHOUSE ONE C/O THE RELATED GROUP OF FLORIDA **MIAMI FL 33145 MIAMI FL 33145** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (11/03) City & State City & State Applied For 4. FEI Number 01-0721254 Not Applicable. Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired X Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BERGER, JAMES L ESQ. Street Address (P.O. Box Number is Not Acceptable) 350 LAS OLAS BLVD., SUITE 1000 FT. LAUDERDALE FL 33301 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE TITLE Change ☐ Addition ☐ Delete PEREZ, JORGE NAME STREET ADDRESS 2828 CORAL WAY, PENTHOUSE ONE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33145 CITY-ST-ZIP TITLE MGR ☐ Delete TITLE ☐ Change Addition NAME ROCHA, ROBERTO NAME STREET ADDRESS 2828 CORAL WAY, PENTHOUSE ONE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33145 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME RABINA, MAIDAD .... NAME STREET ADDRESS STREET AODRESS 2828 CORAL WAY, PENTHOUSE ONE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33145** MGR TITLE ☐ Delete TITLE ☐ Change ☐ Addition PAARNES, HOWARD NAME NAME STREET ADDRESS 455 CENTRAL PARK AVE. STREET ADDRESS SCARSDALE NY 10583 CITY-ST-ZIP CITY-ST-ZIF Delete TILLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

NGEL HERNANDEZ

FILED