

Apr. 28. 2005 10:11AM

No. 9656 P. 4

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000003060

1. Entity Name
SERGIO'S PARK PLACE PROPERTIES, LLC



Principal Place of Business
**407 PARK PLACE
HOMESTEAD, FL 33030**

Mailing Address
**PEREZ BEHAR & ASSOC., P.A.
13935 NW 1ST AVENUE
MIAMI, FL 33168**



04262005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0989365

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PEREZ, BEHAR & ASSOCIATES, P.A.
13935 NW 1ST AVENUE
N MIAMI, FL 33168**

**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 of the current registered agent of this company

NOTE: Registered agent must be a resident of the state

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MEM
NAME	CARBALLO, SERGIO
STREET ADDRESS	407 PARK PLACE
CITY-ST-ZIP	HOMESTEAD, FL 33030
TITLE	MEM
NAME	CARBALLO, DELIA
STREET ADDRESS	407 PARK PLACE
CITY-ST-ZIP	HOMESTEAD, FL 33030
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000358005
05/04/05-80093-025 50.00

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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)(b), 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 of the limited liability company as indicated by Chapter 608, Florida Statutes.

SIGNATURE

Sergio Carballo

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

4/28/05

Date

(305) 248-4111

Daytime Phone #