

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 21, 2004 8:00 am
Secretary of State

09-21-2004 90039 025 ****50.00

DOCUMENT # L00000004693 1. Entity Name CGC REALTY, LLC	
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Principal Place of Business 1600 N.W. 163 STREET MIAMI, FL 33169	Mailing Address 1600 N.W. 163 STREET MIAMI, FL 33169
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DO NOT WRITE IN THIS SPACE



07302004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1005209	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SEIF, EVAN D
2800 PONCE DE LEON BLVD., SUITE 1125
CORAL GABLES, FL 33134

**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 obligation of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHAPLIN, WAYNE E 2800 PONCE DE LEON BLVD., #1125 CORAL GABLES, FL 33146
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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)(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: Wayne E Chaplin 8/27/04 305-625-4171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #