

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000010639

1. Entity Name
1919 ST. CLAUDE AVENUE, L.L.C.



Principal Place of Business
9155 SOUTH DADELAND BLVD.
SUITE 1012
MIAMI, FL 33156

Mailing Address
9155 SOUTH DADELAND BLVD.
SUITE 1012
MIAMI, FL 33156

FILED
Jan 30, 2004 08:00 AM
Secretary of State



01132004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
65-1105473

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRIEND, RICHARD A ESQ
9155 SOUTH DADELAND BLVD.
SUITE 1012
MIAMI, FL 33156

**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 the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when testing)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
FRIEND, SHIRLEY
3804 MONSERRATE STREET
CORAL GABLES, FL 33134

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
WILKOW, SHEILA
11111 BISCAYNE BLVD., #1254
MIAMI, FL 33181

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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02/02/04-80009-024 150.00

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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)(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:

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

Date

Daytime Phone #

1/28/04 (305) 667-5777