

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000010932

1. Entity Name
ODESTER ONE, L.L.C.



Principal Place of Business
3621 NE MIAMI COURT
MIAMI, FL 33137

Mailing Address
C/O ODEGARD, INC.
200 LEXINGTON AVE., #1206
NEW YORK, NY 10016



05242004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1049663

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILVANA GARRIDO-HARTY
465 NE 50TH TERRACE
MIAMI, FL 33137

**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

Silvana Garrido-Harty
Signature, typed or printed name of registered agent and the filer

(NOTE: Registered Agent signature required when reinstating)

05/27/04
DATE

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

1000000161957
06/03/04-80001-001 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	STEPHANIE ODEGARD
STREET ADDRESS	200 LEXINGTON AVE., #1206
CITY - ST - ZIP	NEW YORK, NY 10016

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #