## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L00000011450

1. Entity Name
COLL-ALHAMBRA, LLC



FILED
May 10, 2004 08:00 AM
Secretary of State

Principal Place of Business

10840 SNAPPER CREEK ROAD CORAL GABLES, FL 33156 Mailing Address

10840 SNAPPER CREEK ROAD CORAL GABLES, FL 33156



02022004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1042738 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

COLL, SANDRA 10840 SNAPPER CREEK ROAD CORAL GABLES, FL 33156

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	named entity submits this statement for the purpose of chai ions of registered agent.	nging its registen	 ed office or registered agent, or bot	th, in the State of Florida. I	am familiar with, and accept
SIGNATURE_					
Signature, typed or printed name of registered agent and little if applicable.		(NOTE: Registere	(NOTE: Registered Agent signature required when reinstating)  OATE		
F(	ling Fee is \$50.00 ue by May 1, 2004			1900000x=0.	107
9.	MANAGING MEMBERS/MANAGERS	· · · · · · · · · · · · · · · · · · ·		U000001594 05/10/04-8002	18-UUS CU UU
TITLE NAME STREET ADORESS	P COLL, SANDRA 10840 SNAPPER CREEK ROAD				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES, FL 33156				
ntle Name Street address City-St-Jip			DO	NOT WRI	TE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					 
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature should be company or the receiver or trustee empowered to execute.	qualify for the exe half have the same cute this report as	mption stated in Section 119.07(3)( e legal effect as if made under oath s required by Chapter 608, Florida	(i), Florida Statutes, I further; that I am a managing me Statutes.	r certify that the information amber or manager of the