

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90040 046 \*\*\*150.00

DOCUMENT # L00000011468

1. Entity Name  
EAST FAIRVIEW HOMES L.L.C.



Principal Place of Business  
3052 S.W. 27 AVENUE  
MIAMI, FL 33133

Mailing Address  
3052 S.W. 27 AVENUE  
MIAMI, FL 33133

2. Principal Place of Business

2200 South Dixie Hwy

Suite, Apt. #, etc.

Suite 705

City & State

Coconut Grove, FL

Zip  
33133

Country  
Dade

3. Mailing Address

2200 South Dixie Hwy

Suite, Apt. #, etc.

Suite 705

City & State

Coconut Grove, FL

Zip  
33133

Country  
Dade



04182005 Chg-LLC CR2E083 (10/03)

4. FEI Number  
65-1050225

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RENZI, PASQUALE  
3052 S.W. 27 AVE. #101  
MIAMI, FL 33133

7. Name and Address of New Registered Agent

Name  
Renzi, Pasquale  
Street Address (P.O. Box Number is Not Acceptable)  
2200 South Dixie Hwy  
Suite 705  
City  
Coconut Grove, FL Zip Code  
33133

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 *Pasquale Renzi* Pasquale Renzi

4/15/05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RENZI HOLDINGS INC 3052 SW 27 AVE. #101 MIAMI, FL 33133	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Renzi Holdings, Inc. 2200 South Dixie Hwy Suite 705 Coconut Grove, FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Pasquale Renzi* Pasquale Renzi

4/15/05

305-858-2286

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

Date

Daytime Phone #