## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**SIGNATURE** 

## Jan 24, 2005 08:00 AM DOCUMENT # L00000011712 **Secretary of State** 1. Entity Name E.S. KAPLAN - HILLSBORO, LLC Principal Place of Business Mailing Address 751 SW 66TH AVE. NORTH LAUDERDALE FL 33068 751 SW 66TH AVE. NORTH LAUDERDALE FL 33068 2. Principal Place of Business\_\_\_\_ 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/04) City & State City & State 4. FEI Number Applied For 65-1050089 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KAPLAN, EDWARD S Street Address (P.O. Box Number is Not Acceptable) 751 SW 66TH AVE. NORTH LAUDERDALE FL 33068 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGRM ĐΙΕΕ Change ☐ Addition ☐ Delete NAME KAPLAN, EDWARD S TRUSTEE STREET ADDRESS STREET ADDRESS 751 SW 66TH AVE, CITY-ST-ZIP NORTH LAUDERDALE FL 33068 (17Y-ST-ZIP TITLE Delete THE Change ☐ Addition U00000195127 01/26/05-80016-012 55.00 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP ☐ Addition Change ☐ Delete HULF THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete TITLE Change Addition THLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7P CITY-ST-ZIP Change TITLE Delete TITLE Addition NAME NARAE STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete HEEF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of distere empowered to execute this report as required by Chapter 608, Florida Statutes.

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