


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90070 035 ****50.00

DOCUMENT # L00000012817 1. Entity Name OPH/WESTON REALTY, L.C.	
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Principal Place of Business 500 EAST BOWARD BOULEVARD, SUITE 1950 FT. LAUDERDALE, FL 33394	Mailing Address 500 EAST BOWARD BOULEVARD, SUITE 1950 FT. LAUDERDALE, FL 33394
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DO NOT WRITE IN THIS SPACE

01282004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1076567	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMAWAY, MICHAEL P
500 EAST BOWARD BOULEVARD, SUITE 1950
FT. LAUDERDALE, FL 33394

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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) DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAMELHAIR, STEVEN R 224D SW 70 Ave Suite D PLANTATION, FL 33317
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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:  Steven Kamelhair
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Manager
 Date: 1/29/04 954
 Daytime Phone #: 797-4924