



**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000014143 1. Entity Name COYNE ENTERPRISES, LLC	
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Principal Place of Business 12895 BISCAYNE BAY DR. NORTH MIAMI, FL 33181	Mailing Address 12895 BISCAYNE BAY DR. NORTH MIAMI, FL 33181
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DO NOT WRITE IN THIS SPACE


03042005 No Chg-LLC CR2E083 (10/03)
4. FEI Number 65-1056714 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GOLDSTON, STEVEN 10729 SW 104 STREET MIAMI, FL 33176	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ANN H. COYNE TRUST 12895 BISCAYNE BAY DR NORTH MIAMI, FL 33181
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03/24/05-80037-009 50.00

**DO NOT WRITE
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 608, Florida Statutes.

SIGNATURE: Ann H. Coyne ✓ 3/27/2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ANN H. COYNE