

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000000199

1. Entity Name
AEA24, LLC



Principal Place of Business

720 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432

Mailing Address

720 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432

FILED
Mar 22, 2004 08:00 AM
Secretary of State



03162004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

65-1075329

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KARRAM, ALFRED SR
720 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432

**DO NOT WRITE
IN THIS SPACE**

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

000000094232
03/22/04-80051-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
KARRAM, ALFRED SR
720 E PALMETTO PARK RD
BOCA RATON, FL 33432

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
KARRAM, EMILIA
720 E PALMETTO PARK RD
BOCA RATON, FL 33432

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
KARRAM, ALFRED JR
720 E PALMETTO PARK RD
BOCA RATON, FL 33432

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

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

Date

Daytime Phone #

Alfred Karam, Sr.
Alfred Karam, Sr. 3/16/04 (561) 394-9900