

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L01000000224

1. Entity Name
AEA23, LLC



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

Principal Place of Business
720 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432

Mailing Address
720 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432



03162004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1083461

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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**

000000094233
03/22/04-80051-009 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:

Alfred Karam, Sr. 3/16/04 (56) 394-9900

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

Date

Daytime Phone #