2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000004358

1. Entity Name
EIGHT TWENTY NINE, LLC

Principal Place of Business	Mailing Address
41 BAY COLONY DRIVE FORT LAUDERDALE, FL 33308	4901 NW 17 WAY #103 FORT LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE

01262005No Chg-LLC CR2E083 (10/03)

4. FEI Number
65-1104509
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BOOKSTEIN, MERRILL A
2499 GLADES ROAD, SUITE 308
BOCA RATON, FL 33431

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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, 2005

U00000343914
04/29/05-80112-022 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	EIGHT TWENTY NINE MANAGEMENT CORPORATION
STREET ADDRESS	41 BAY COLONY DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #