## **2004 LIMITED LIABILITY COMPANY**

SIGNATURE:

SIGNATURE AND THEU OR PRINTER

## Jun 18, 2004 8:00 am **Secretary of State ANNUAL REPORT** 06-18-2004 90157 005 \*\*\*\*50.00 **DOCUMENT # L01000004611** 1. Entity Name HGSD, LLC Principal Place of Business Mailing Address 8500 SW 8TH STREET 8500 SW 8TH STREET 14024066 SUITE 228 SUITE 228 MIAMI, FL 33144 MIAMI, FL 33144 06142004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1086034 Not Applicable \$5.00 Additional 5. Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MACHADO, JOSE 8500 SW 8TH STREET SUITE 238 IN THIS SPACE MIAMI, FL 33144 8. The above named entity submits this statement for the purpose or 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 it applicable Filing Fee is \$50.00 Due by September 8, 2004 MANAGING MEMBERS/MANAGERS 9. TITLE MGR VICTORIA REAL ESTATE MANAGEMENT INC. NAME 8500 SW 8TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE. NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME -STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP - E 11. I hereby certify that the information supplied with this filling 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.

ME OF SURNING MANAGING MEMBER, OR NUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**FILED**