2004 [redacted] ANNUAL REPORT

5/12/

FILED
Jun 07, 2004 8:00 am
Secretary of State
05-12-2004 90006 006 ***150.00

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1. Entity Name
G64-5 INVMT CO. LLC

Principal Place of Business	Mailing Address
222 S MILITRY TRAIL DEERFIELD BCH, FL 33442	222 S MILITRY TRAIL DEERFIELD BCH, FL 33442

34008208

05022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0086590 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MERRILL A. BOOKSTEIN, COUNSELOR AT LAW, P. A.
2499 GLADES RD, STE 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	MGRM
NAME	GORDON, MARTIN
STREET ADDRESS	222 S MILITRY TRAIL
CITY-ST-ZIP	DEERFIELD BCH, FL 33442
TITLE	MGRM
NAME	SEYMOUR GORDON
STREET ADDRESS	1201 S. OCEAN DR. APT 1601N
CITY-ST-ZIP	HOLLYWOOD, FLA. 33019
TITLE	MGRM
NAME	MANUEL HANO
STREET ADDRESS	1201 S. OCEAN DR. APT. 1101S
CITY-ST-ZIP	HOLLYWOOD, FLA. 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martin Gordon 5/1/04 9542610158
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #