2004 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT **DOCUMENT # L01000006829** 1. Entity Name LA MANSION, L.L.C.



FILED Mar 10, 2004 8:00 am Secretary of State

03-10-2004 90187 001 ***150.00



Principal Place of Business

18767 BISCAYNE BLVD AVENTURA, FL 33180

Mailing Address

18767 BISCAYNE BLVD AVENTURA, FL 33180



01162004 No Chg-LLC

CR2E083 (10/03)

Applied For 4. FEI Number 65-1098847 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required ----

6. Name and Address of Current Registered Agent

M&W AGENTS, INC. 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431

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	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent,	or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable,	(NOTE: Registered Agent signature required when reinstation	ng) DATE
F	lling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	A C ENTERPRISES, LTD		
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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 pryisignature 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 approximately that I am a managing member or manager of the limited liability company or the receiver or trustee approximately that I am a managing member or manager of the limited liability company or the receiver or trustee approximately that I am a managing member or manager of the limited liability company or the receiver or trustee.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINCED FORME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3.2.2004