

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 14, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000007641

1. Entity Name

FRANCISCO T. SANZ-ARANCON, L.L.C.



Principal Place of Business

201 MADEIRA AVE.
CORAL GABLES, FL 33134

Mailing Address

201 MADEIRA AVE.
CORAL GABLES, FL 33134



01052004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRIZUELA, RAUL
201 MADEIRA AVE.
CORAL GABLES, FL 33134

**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 re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

000000112554
04/14/04-80025-015 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME SANZ ARANCON, FRANCISCO T
STREET ADDRESS 201 MADEIRA AVE.
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE
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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 #

Raul Brizuela 04/14/04 305-322-8966