

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008360

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: SANTA FE ESTATES, L.L.C.

## Current Principal Place of Business:

550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 83-0353798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEISENFELD, JOSEPH J  
550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: BROMBERG, M  
Address: 550 BILTMORE WAY STE 1120  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRP ( ) Delete  
Name: FRAYOR, O  
Address: 550 BILTMORE WAY, STE 1120  
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete  
Name: WEISENFELD, JOSEPH J  
Address: 550 BILTMORE WAY, STE 1120  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: FREYER, O  
Address: 550 BILTMORE WAY, STE 1120  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change ( ) Addition  
Name: WEISENFELD, JOSEPH J  
Address: 550 BILTMORE WAY, STE 1120  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: M BROMBERG

MGR

04/30/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date