
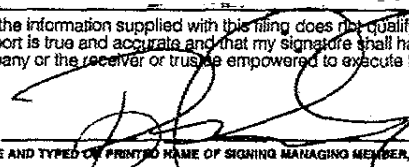


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000010241		
1. Entity Name PERLBERG PROPERTIES, L.L.C.		
Principal Place of Business 16 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004	Mailing Address 16 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PERLBERG, ROBERT 16 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2004		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PERLBERG, ROBERT 16 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		



02062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

U00000109340
04/12/04-80039-023 50.00

**DO NOT WRITE
IN THIS SPACE**

4/7/04 954-925-5190
Date Daytime Phone #