

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000012878

1. Entity Name
AAR PROPERTIES, LLC



Principal Place of Business
**5898 N.W. 25TH COURT
BOCA RATON, FL 33496**

Mailing Address
**5898 N.W. 25TH COURT
BOCA RATON, FL 33496**



01122004No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-1133456

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HOPTA, ANDREW J
5898 NW 25TH CT
BOCA RATON, FL 33496**

**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 reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
HOPTA, ANDREW J
5898 N.W. 25TH COURT
BOCA RATON, FL 33496**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
HOPTA, ANDREW J JR.
5898 N.W. 25TH COURT
BOCA RATON, FL 33496**

TITLE
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000000005273
01/15/04-80046-025 50.00

**DO NOT WRITE
IN THIS SPACE**

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: *Andrew J. Hopta*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-12-04
Date

561-999-8798
Daytime Phone #