

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014353

Entity Name: GROVE SQUARE 235-431-433 LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

13971 SW 140TH STREET
MIAMI, FL 33186

New Principal Place of Business:

3575 BATTERSEA RD
MIAMI, FL 33133

Current Mailing Address:

13971 SW 140TH STREET
MIAMI, FL 33186

New Mailing Address:

3575 BATTERSEA RD
MIAMI, FL 33133

FEI Number: 01-0642866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTEVEZ, MICHAEL M
13971 SW 140TH STREET
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

MURPHY, LINDA F
3575 BATTERSEA RD
MIAMI, FL 33133 US

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: LINDA F MURPHY

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MURPHY, LINDA F
Address: 13971 SW 140TH STREET
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: ESTEVEZ, MICHAEL M
Address: 13971 SW 140TH STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MURPHY, LINDA F
Address: 3575 BATTERSEA RD
City-St-Zip: MIAMI, FL 33133

Title: MGR (X) Change () Addition
Name: MURPHY, LINDA F
Address: 3575 BATTERSEA RD
City-St-Zip: MIAMI, FL 33133

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: LINDA F MURPHY

MGRM

04/29/2005

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