


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000014699</b> 1. Entity Name CDE HOLDINGS, LLC	
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Principal Place of Business  
7130 SW 44 STREET  
MIAMI, FL 33155-4611

Mailing Address  
7130 SW 44 STREET  
MIAMI, FL 33155-4611

**DO NOT WRITE IN THIS SPACE**

**(L01000014699C)**

04212004No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
65-1136199

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SUMMERLIN, ANA M  
7130 SW 44 STREET  
MIAMI, FL 33155-4611

**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 SUMMERLIN, ANA M 7130 SW 44 STREET MIAMI, FL 33155
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U000000153769  
05/04/04-80142-001 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:** Ana M Summerlin  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/29/04 (305) 467-8660  
Date Daytime Phone #