

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

DOCUMENT # L01000014886

1. Entity Name
DORAL ACCESS REALTY LLC



04 APR 16 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8001 N.W. 36 STREET, SUITE 100
MIAMI, FL 33166

Mailing Address
8001 N.W. 36 STREET, SUITE 100
MIAMI, FL 33166



04152004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1134948

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANGULO, ANGEL
8001 N.W. 36 STREET, SUITE 100
MIAMI, FL 33166

**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

4-15-04

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

9. MANAGING MEMBERS/MANAGERS

TITLE **P**
NAME **ANGULO, ANGEL**
STREET ADDRESS **8001 NW 36 STREET SUITE 100**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE
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CITY-ST-ZIP

200034379832
04/28/04--01018--017 **\$5.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-15-04