

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90449 030 ****50.00

DOCUMENT # L01000014931

1. Entity Name
7744 COLLINS, L.L.C.



Principal Place of Business
**300 ARAGON AVE., STE. 330
CORAL GABLES, FL 33134**

Mailing Address
**300 ARAGON AVE., STE. 330
CORAL GABLES, FL 33134**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03092004 Chg-LLC CR2E083 (10/03)

4. FEI Number
65-1145534

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORAZZINI, PABLO
1865 BRICKELL AVE APT A-1814
MIAMI, FL 33129**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, the registered agent.

SIGNATURE

PABLO CORAZZINI, MGRM

APRIL 19, 04

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

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

**Make check payable to:
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MEM
CORAZZINI, PABLO
1865 BRICKELL AVE. A-1814
MIAMI, FL 33129** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CORAZZINI, PABLO
1865 BRICKELL AVE A-1814
MIAMI, FL 33129** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MEM
ROMAGNOLI, MARCO
5025 COLLINS AVE. #1501
MIAMI BEACH, FL 33140** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
ROMAGNOLI, MARCO
5025 COLLINS AVE # 1501
MIAMI BEACH, FL 33140** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MEM
STARAC, LLC
c/o 780 NW 42nd Avenue, Suite 324
MIAMI, FL 33126** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
STARAC, LLC
c/o 780 NW 42nd Avenue, Suite 324
MIAMI, FL 33126** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MEM ☐ Change ☐ Addition

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

PABLO CORAZZINI MGRM APRIL 19, 04 305 567 06 02