#### 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L01000017880** 

1. Entity Name

CREEKSTONE PROPERTY INVESTMENTS, LLC



Principal Place of Business

2201 NW 30TH PLACE, SUITE A POMPANO BEACH, FL 33069

Mailing Address

2201 NW 30TH PLACE, SUITE A POMPANO BEACH, FL 33069

### FILED Apr 08, 2005 8:00 am Secretary of State

04-08-2005 90280 020 \*\*\*\*50.00



02082005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3750987

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 500 EAST WEST PALM BEACH, FL 33401

## DO NOT WRITE IN THIS SPACE

<ol> <li>The above named entity submits this statement for the purpose of cha the obligations of registered agent.</li> </ol>	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SiGNATURE Signature, typed or printed name of registered agent and title il applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005		

#### 9. MANAGING MEMBERS/MANAGERS MGR TITLE NAME ALNAJJAR, NADER STREET ADDRESS 2201 NW 30TH PLACE, SUITE A CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE CHALEFF, LAWRENCE N NAME STREET ADDRESS 2201 NW 30TH PLACE, SUITE A CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE CLARK, SUSAN I NAME STREET ADDRESS 2201 NW 30TH PLACE, SUITE A CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE MCR NAME DHANANI, MEENAZ STREET ADDRESS 2201 NW 30TH PLACE, SUITE A CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE NAME LAL, SANJAY STREET ADDRESS 2201 NW 30TH PLACE, SUITE A CITY-ST-ZIP POMPANO BEACH, FL 33069 TITLE NAME SHETTY, DAYANAND 2201 NW 30TH PLACE, SUITE A STREET ADDRESS POMPANO BEACH, FL 33069

# 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: STANLIN

3/3/05

1407-239-9142

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

Date

Daytime Phone #