

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90028 006 ****50.00

DOCUMENT # L01000020914

1. Entity Name
FLEXXSPACE MANAGEMENT, LLC



Principal Place of Business
**1400 N.W. 107TH AVENUE
MIAMI, FL 33172 US**

Mailing Address
**1400 N.W. 107TH AVENUE
MIAMI, FL 33172 US**

24065239



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03292004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
65-1157184

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**LEVY, JOEL
1400 N.W. 107TH AVENUE
MIAMI, FL 33172**

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 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**

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
AP-ADLER INVESTMENT FUND 2, L.P.
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ADLER, MICHAEL M.
1400 NW 107 AVE., 5TH FLOOR
MIAMI, FL 33172** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
ADLER, MICHAEL M
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
NEIBERT, LEE
1301 AVENUE OF THE AMERICAS, 38TH FLOOR
NEW YORK, NY 10019** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EV/C
LEVY, JOEL
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EV
HEISLER, DANIEL
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S/T
ARRIZURIETA, LUIS
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
ADLER, LINDA K
1400 N.W. 107TH AVENUE
MIAMI, FL 33172** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

**Joel Levy
Executive Vice President**

4/27/04

305-392-4051

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

Date

Daytime Phone #