

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

09-21-2004 90039 049 ****55.00

DOCUMENT # L01000021065

1. Entity Name
AREU, LLC



Principal Place of Business
**500 S.W. 130 TERRACE
PEMBROKE PINES, FL 33027**

Mailing Address
**500 S.W. 130 TERRACE
PEMBROKE PINES, FL 33027**



09082004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
80-0022016

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BECHAMP, HILDA
500 S.W. 130 TERRACE
PEMBROKE PINES, FL 33027**

**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 September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE **P**
NAME **BECHAMP, HILDA M**
STREET ADDRESS **500 S.W. 130 TERRACE**
CITY-ST-ZIP **PEMBROKE PINES, FL 33027**

TITLE **V**
NAME **BECHAMP, LOUISE M**
STREET ADDRESS **1040 N.W. 70TH WAY**
CITY-ST-ZIP **PLANTATION, FL 33313**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: *Hilda M. Bechamp*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

9/7/04
Date

Daytime Phone #

Hilda M. Bechamp

(954) 431-5387