

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90213 044 ****50.00

DOCUMENT # L01000022758

1. Entity Name

LOUIS B. BERNSTEIN, LLC



Principal Place of Business

1926 10TH AVE. NORTH
SUITE 400
LAKE WORTH FL 33461

Mailing Address

1926 10TH AVE. NORTH
SUITE 400
LAKE WORTH FL 33461

2. Principal Place of Business

3. Mailing Address

625 NORTH FLAGLER DRIVE 625 NORTH FLAGLER DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 625

SUITE 625

City & State

City & State

WEST PALM BEACH, FLORIDA

WEST PALM BEACH, FLORIDA

Zip

Country

Zip

Country

33401

U.S.A.

33401

U.S.A.



1st MOORE

CR2E083 (10/04)

4. FEI Number

26-0010712

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

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH FL 33139

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE P ☒ Delete
NAME BERNSTEIN, LOUIS B
STREET ADDRESS 1926 10TH AVENUE NORTH, SUITE 400
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE P ☒ Change ☐ Addition
NAME BERNSTEIN, LOUIS B
STREET ADDRESS 625 N. FLAGLER DRIVE, SUITE 625
CITY-ST-ZIP WEST PALM BEACH, FLORIDA 33401

TITLE S ☒ Delete
NAME BERNSTEIN, SUSAN B
STREET ADDRESS 1926 10TH AVENUE NORTH, SUITE 400
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE S ☒ Change ☐ Addition
NAME BERNSTEIN, SUSAN L.
STREET ADDRESS 625 N. FLAGLER DRIVE, SUITE 625
CITY-ST-ZIP WEST PALM BEACH, FLORIDA 33401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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]

LOUIS B. BERNSTEIN

4-5-05

561-352-2244

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

Date

Daytime Phone #