

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000001204

1. Entity Name
WATERLOFTS LLC



Principal Place of Business

18851 NE 29TH AVE.
SUITE 1011
AVENTURA, FL 33180

Mailing Address

18851 NE 29TH AVE.
SUITE 1011
AVENTURA, FL 33180



03042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
04-3608365

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JACQUES CLAUDIO STIVELMAN
STE. 2980, TWO S. BISCAYNE BLVD.
MIAMI, FL 33131

**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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$338.75**

U000000939065

05/28/08-90014-003 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	REAL INVEST DEVELOPMENT CORP.
STREET ADDRESS	18851 NE 29TH AVE., SUITE 1011
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	MGR
NAME	BENS MARINA TWO, LLC
STREET ADDRESS	18851 NE 29TH AVE., SUITE 1011
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

04/30/08

(305) 431-1000