

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90071 037 ****50.00

DOCUMENT # L02000001507

1. Entity Name
THE METROPOLITAN, LLC



Principal Place of Business
**200 SOUTH BISCAYNE BLVD.
SUITE 600
MIAMI, FL 33131**

Mailing Address
**200 SOUTH BISCAYNE BLVD.
SUITE 600
MIAMI, FL 33131**

DO NOT WRITE IN THIS SPACE



01162004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
80-0033680

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BERKOWITZ, RICHARD A
200 SOUTH BISCAYNE BLVD.
SUITE 600
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

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
GOETZ, TERRY
209 MEADOW OAKS DRIVE
BURLESON, TX 76028**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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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:

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

3-18-04

Date

817-590-8002

Daytime Phone #