2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000002219

1. Entity Name
EISSEL PROPERTIES, LLC

Principal Place of Business	Mailing Address
1645 PALM BEACH LAKES BLVD. SUITE 1200 WEST PALM BEACH, FL 33401	1645 PALM BEACH LAKES BLVD. SUITE 1200 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

01062004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
03-0483724	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LIOCE, DOMENICK
1645 PALM BEACH LAKES BLVD.
SUITE 1200
WEST PALM BEACH, FL 33401

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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	MGR
NAME	LIOCE, DOMENICK R
STREET ADDRESS	1645 PALM BEACH LAKES BLVD #1200
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   4-28-04   561 -6863307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #