


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000002687**

1. Entity Name  
TERRAMAX REALTY, L.L.C.



Principal Place of Business 2912 DOUGLAS RD. MIAMI, FL 33134	Mailing Address 2912 DOUGLAS RD. MIAMI, FL 33134
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**DO NOT WRITE IN THIS SPACE**



04262004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 30-0039225	Applied For Not Applicable
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5. Certificate of Status Desired  **\$5.00** Additional Fee Required

5. Name and Address of Current Registered Agent

BLANCO, MAUEL A ESQ.  
1313 PONCE DE LEON BLVD., STE. 301  
CORAL GABLES, FL 33134

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature (void or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

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


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM BLANCO, JORGE L 2912 DOUGLAS RD. MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM RODRIGUEZ, ARMANDO 2912 DOUGLAS RD. MIAMI, FL 33134
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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:**  **4/30/04**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #