2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003732

FILED
Apr 26, 2004
Secretary of State

Entity Name: JULIUS LAND COMPANY, LLC

Current Principal Place of Business:

6150 S.W. 88 STREET
MIAMI, FL 33156

New Principal Place of Business:

701 BRICKELL AVENUE
SUITE 2050
MIAMI, FL 33131

Current Mailing Address:

6150 S.W. 88 STREET
MIAMI, FL 33156

New Mailing Address:

701 BRICKELL AVENUE
SUITE 2050
MIAMI, FL 33131

FEI Number: 45-0478167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, PEDRO A ESQ
C/O GREENBERG TRAURIG, P.A.
1221 BRICKELL AVENUE, SUITE 2100
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: ______________________________

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: HARPER, HENRY
Address: 6150 S.W. 88 STREET
City-St-Zip: MIAMI, FL 33156

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HARPER, HENRY
Address: 701 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Change (X) Addition
Name: GUZMAN, GRACIEAL
Address: 701 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: HENRY E. HARPER MGRM 04/26/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date