


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 22, 2004 8:00 am
Secretary of State

06-22-2004 90066 013 ****50.00

DOCUMENT # L02000004154 1. Entity Name PORTOFINO PENTHOUSE II, L.L.C.					
Principal Place of Business 300 SOUTH POINTE DRIVE, NO. PH2 MIAMI BEACH, FL 33139			Mailing Address C/O ALAN E KRINZMAN ESQ 2600 S BAYSHORE DRIVE MIAMI, FL 33133		
2. Principal Place of Business		3. Mailing Address c/o Villazzo, LLC			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 119 Washington Avenue			
City & State		City & State Miami Beach Florida			
Zip 33130	Country	Zip 33130	Country	4. FEI Number 04-3620964	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent KRINZMAN, ALAN E ESQ 2601 S BAYSHORE DRIVE STE 1600 MIAMI, FL 33133			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 <u><i>Alan E. Krinzman</i></u> DATE <u>6/16/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by September 8, 2004			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JAGODZINSKI, CHRISTIAN 10 PALM AVENUE MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RIDOUTT, PAUL 10 PALM AVENUE MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PORTOFINO PARTNER, LLC. C/O A. KRINZMAN, STE 1600 MIAMI, FL 33133	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTANO HOLDING, LTD 10 PALM AVENUE MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Delete			
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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: <u><i>Christian Jagodzinski</i></u> (305) 777-0146 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					