2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000005679

 Entity Name SOUTH BEACH COURTYARD DEVELOPMENT, LLC

Principal Place of Business

9425 HARDING AVENUE SURFSIDE, FL 33154 Mailing Address

9425 HARDING AVENUE SURFSIDE, FL 33154

FILED Jan 26, 2004 08:00 AM Secretary of State



01082004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 01-0630098

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FINVARB, RICHARD 9425 HARDING AVENUE SURFSIDE, FL 33154

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	\$407E Registered Agent signature required when reinstating}	DATE	
F	iling Fee is \$50.00 ue by May 1, 2004			
9.	MANAGING MĒMBERS/MANAGĒRS			
DILE NAME STREET ADDRESS	MGRM FINVARB, RICHARD 9425 HARDING AVE.			
CITY-ST-ZIP	MIAMI BEACH, FL 33139		U00000013277 01/26/04-80047-008 50.00	
THILE NAME STREET ADDRESS CHY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	IN THIS SPACE	
HTLE NAME SIREET ADDRESS CHY-ST-ZIP				
TITLE NAME SIREET ADDRESS				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

Hichard Finuarb