## 2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # L02000008483**

1. Entity Name
AMAS DEVELOPMENT - BONTONA, LLC



FILED Feb 02, 2004 8:00 am Secretary of State

02-02-2004 90208 044 \*\*\*\*50.00

Principal Place of Business 1103 EAST LAS OLAS BOULEVARD, SUTIE 200 FORT LAUDERDALE, FL 33301		Mailing Address 1103 EAST LAS OLAS BOULEVARD, SUTIE 200 FORT LAUDERDALE, FL 33301		0 ₩¥₩₩₩
2 Principal P	lace of Business	3. Mailing Address		
Z. Fincipair	lace of Business	a. Mailing Address		לעפור עו הראוש מוסוסו התאנה ונענה ואנונה ווענה ווענה אומים ווענה חובות חובות חובות הווענה אומים עו
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01232004 Chg-LLC CR2E083 (10/03)
City & State	е	City & State		4. FEI Number 555 - 083301410 Applied For Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired Space Spa
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
SHIFF, MICHAEL A 1103 EAST LAS OLAS BOULEVARD, SU FORT LAUDERDALE, FL 33301		ЛІЕ 200	Street Address	ss (P.O. Box Number is Not Acceptable)
4	•		City	FL Zip Code
	named entity submits this statement for ions of registered agent.	r the purpose of changing its r	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE .	Signature, typed or printed name of registered agent	end title if aggingable. (NOTE	Registered Agent signature req	used when renstating)  DATE
<u>,</u>			7,000	
Fi	iling Fee is \$50.00 ue by May 1, 2004			Make check payable to Florida Department of State
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9.	MANAGING MEMBE	RS/MANAGERS	10.	ADDITIONS/CHANGES
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9. TITLE NAME	MANAGING MEMBE MGRM SHIFF, MICHAEL A	□ Delete	TITLE NAME	ADDITIONS/CHANGES
9. TITLE	MANAGING MEMBE MGRM SHIFF, MICHAEL A 1103 EAST LAS OLAS BOULEV.	Delete	TITLE	ADDITIONS/CHANGES
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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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: