

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009339

FILED  
Feb 20, 2004  
Secretary of State

Entity Name: OLD CUTLER COVE, LLC

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD., SUITE 600  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

1801 CORAL WAY  
403  
MIAMI, FL 33145

**New Mailing Address:**

FEI Number: 02-0575464      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PORTUONDO, FERNANDO J P.A.  
2121 PONCE DE LEON BLVD., SUITE 600  
CORAL GABLES, FL 33134

**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: ISAAC, JAIRO  
Address: 1801 LORD WAY #403  
City-St-Zip: MIAMI, FL 33145

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ISAAC, JAIRO  
Address: 1801 CORAL WAY #403  
City-St-Zip: MIAMI, FL 33145

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: JAIRO ISAAC

MGR

02/20/2004

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