

**2004 LIMITED LIABILITY COMPANY  
AMENDED ANNUAL REPORT**

**FILED**  
04 NOV -1 PM 5:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*MK*



<b>DOCUMENT # L02000010259</b>					
1. Entity Name LITTLE HAVANA NEIGHBORHOOD PROPERTIES, LLC					
Principal Place of Business 6526 VIA ROSA BOCA RATON, FL 33433			Mailing Address 6526 VIA ROSA BOCA RATON, FL 33433		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		10292004 Chg-LLC CR2E083 (10/03)	
Zip		Country		4. FEI Number 37-1429422	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WELBLAT, JACK 6526 VIA ROSA BOCA RATON, FL 33433			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$50.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WEISBLAT, JACK		NAME	200042349342	
STREET ADDRESS	6526 VIA ROSA		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP		
TITLE	Manager	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Theresa Santana		NAME		
STREET ADDRESS	8919 Dickens Avenue		STREET ADDRESS		
CITY-ST-ZIP	Surfside, FL 33154		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>AMENDED</b>		NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>2004</b>		NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>AR.</b>		NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <i>Jack Weisblat</i>		Jack Weisblat, Manager		10/29/04	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>		<small>Daytime Phone #</small>	



L02000010259

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 950170 5014227

AUTHORIZATION :

*Patricia Pizuto*

COST LIMIT : \$ 50.00

ORDER DATE : November 1, 2004

ORDER TIME : 10:02 AM

ORDER NO. : 950170-005

CUSTOMER NO: 5014227

CUSTOMER: Ms. Cindy Labonte  
Becker & Poliakoff, P.a.  
3111 Stirling Road

Fort Lauderdale, FL 33312

*PK*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: LITTLE HAVANA NEIGHBORHOOD  
PROPERTIES, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#2935

RECEIVED  
04 NOV - 1 AM 10:44  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

EXAMINER'S INITIALS: \_\_\_\_\_