## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000012892

Entity Name: NORTH, L.L.C.

FILED Mar 04, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3575 NE 207TH ST. SUITE B-11 AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 3575 NE 207TH ST. SUITE B-11 AVENTURA, FL 33180 US FEI Number: 30-0077078 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: FINVARB, ROBERT I P.A PEREZ, LEON 3575 NÉ 207TH ST. 1065 KANE CONCOURSE, STE. 201 BAY HARBOUR ISLANDS, FL 33154 US SUITE B-11 AVENTURA, FL 33180 US 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: LEON PEREZ 03/04/2004 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete GUTT, ELIAS Name: Name: 1000 EAST ISLAND BLVD., APT. 2102 Address: Address: City-St-Zip: AVENTURA, FL 33160 US City-St-Zip: Title: MGRM Title: ( ) Delete () Change () Addition KORN, JACKY Name: Name: Address: 21055 YACHT CLUB DR. APT. 1407 Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PEREZ, LEON Name: Name: 19707 TURNBERRY WAY APT. 18L Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition Name: NA, NA Name: Address: NΑ Address: City-St-Zip: NA, NA NA City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NA, NA Name: Address: NA Address: City-St-Zip: NA, NA NA City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NA, NA Name: Name: Address: NA Address: NA, NA NA City-St-Zip: City-St-Zip:

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: LEON PEREZ MR. 03/04/2004