## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # L02000013263

1. Entity Name SHERIDAN 58, LLC



Principal Place of Business

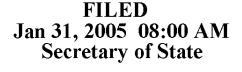
701 NW 62 AVENUE

110 MIAMI, FL 33126 Mailing Address

701 NW 62 AVENUE

110

MIAMI, FL 33126





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01262005 No Chg-LLC CR2E083 (10/03)

02-0611012	Not Applicabl
FEI Number	Applied For

5. Certificate of Status Desired

4.

\$5.00 Additional Fee Required

GONZALEZ, J.A. 701 NW 62 AVENUE			DO NOT WRITE
110 MIAMI, FL 33126	<u> </u>		IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable,

6. Name and Address of Current Registered Agent

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 'Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GONZALEZ, JOSE A 701 NW 62 AVENUE, SUITE 100 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY+ST+ZIP	

11000007207890 02/01/05-80064-015 50.00

DO NOT WRITE IN THIS SPACE

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:

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

Daytime Phone #