## 2005 LIMITED LIABILITY COMPANY

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## FILED **ANNUAL REPORT** Mar 12, 2005 08:00 AM DOCUMENT # L02000014184 **Secretary of State** 1. Entity Name 5202 LLC Principal Place of Business Mailing Address 14500 SW 77TH STREET 14500 SW 77TH STREET MIAMI, FL 33183-2967 MIAMI, FL 33183-2967 03102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THOMPSON, MARGARET C DO NOT WRITE 14500 SW 77TH STREET MIAMI, FL 33183-2967 IN THIS SPACE 3. 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. (NOTE, Registered Agent eignature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE THOMPSON, MARGARET C NAME STREET ADDRESS 14500 SW 77TH ST CITY-ST-ZIP MIAMI, FL 331832967 me MGR U00000261214 03/14/05~80001-022 50.00 THOMPSON, BRYSON H NAME STREET ADDRESS 14500 SW 77TH ST CITY-51-21P MIAMI, FL 331832967 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-51-21P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-71P TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling 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.

2005 **SIGNATURE:** ER, OR AUTHORIZED REPRESENTATIVE