

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 25, 2005 8:00 am
Secretary of State

08-25-2005 90106 043 ****50.00

20067158



07082005 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
01-0724207

Applied For
Not Applicable

5. Certificate of Status Desired ☐ - \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SEIJAS, VICTOR F JR
255 ALHAMBRA CIRCLE, STE. 425 1439 SW 139th Unit
MIAMI, FL 33134 33186 #101

**DO NOT WRITE
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.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE P
NAME SIEJAS, VICTOR F JR
STREET ADDRESS 255 ALHAMBRA CIRCLE, STE. 425 1439 SW 139th
CITY-ST-ZIP MIAMI, FL 33134 33186 Unit 101

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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

Date

Daytime Phone #

8/22/05