


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000017008</b> 1. Entity Name EDYCA REALTY, LLC	
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Principal Place of Business 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193	Mailing Address 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193
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**DO NOT WRITE IN THIS SPACE**



02022004No Chg-LLC CR2E083 (10/03)

4. FEI Number 52-2366833	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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BLANCO, CARLOS B 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HIRSCH, JUAN 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VERA, RAFAEL 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BLANCO, CARLOS B 6955 SOUTHWEST 159TH AVENUE MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000074104  
03/03/04-80004-016 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:** Carlos Blanco CARLOS BLANCO, OPERATING MANAGER 02/23/2004 305-388-3275

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #