

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90099 017 \*\*\*\*50.00

DOCUMENT # L02000017138

1. Entity Name  
2001 INDUSTRIAL, LLC



Principal Place of Business  
:621 N.W. 53RD STREET, SUITE 255  
BOCA RATON, FL 33487

Mailing Address  
:621 N.W. 53RD STREET, SUITE 255  
BOCA RATON, FL 33487

**DO NOT WRITE IN THIS SPACE**



04052005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
03-0510131

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVENUE  
DAYTONA BEACH, FL 32115-2491  
*ERAN SOUTH CORP.*  
*621 NW 53RD ST.*  
*BOCA RATON, FL 33487*

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

(NOTE: Registered Agent signature required when reinstating)

DATE *4/15/05*

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
ZIEGELMAN, ALLAN G  
:621 N.W. 53RD STREET, SUITE 255  
BOCA RATON, FL 33487

TITLE  
NAME  
STREET ADDRESS  
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CITY - ST - ZIP

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

Date

Daytime Phone #