

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000017169	
1. Entity Name SUNRISE HOLDINGS GROUP, L.L.C.	
Principal Place of Business 731 SHOTGUN ROAD SUNRISE, FL 33326	Mailing Address 731 SHOTGUN ROAD SUNRISE, FL 33326



04142005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2049175	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

DIAZ, OSVALDO J
7951 SW 40TH STREET, SUITE 206
MIAMI, FL 33155

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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 May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JAIME REY SOTO 731 SHOTGUN ROAD SUNRISE, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REY, MARIA E 731 SHOTGUN ROAD SUNRISE, FL 33326
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04/18/05-R0114-019 150.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

J. Salomida *JILENA SALAMIDA* 04/14/05 (954) 472-5956

Date

Daytime Phone #