

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90022 016 ****50.00

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DOCUMENT # L02000017297			
1. Entity Name TREASURES DEVELOPMENT, L.L.C.			
Principal Place of Business 3035 NE 208 STREET AVENTURA, FL 33180		Mailing Address 3035 NE 208 STREET AVENTURA, FL 33180	
2. Principal Place of Business 1981 NE 196 TERRACE Suite, Apt. #, etc.		3. Mailing Address 1981 NE 196 TERRACE Suite, Apt. #, etc.	
City & State MIAMI, FLORIDA		City & State MIAMI, FLORIDA	
Zip 33179	Country USA	Zip 33179	Country USA
4. FEI Number NOT APPLICABLE		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 STEAD, RICHARD 3035 NE 208 STREET AVENTURA, FL 33180		7. Name and Address of New Registered Agent Name: STEAD, RICHARD Street Address (P.O. Box Number is Not Acceptable): 1981 NE 196 TERRACE City: MIAMI FL Zip Code: 33179	
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: <u>T.T.T.</u> DATE: <u>4/8/2005</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGRM NAME: STEAD, RICHARD STREET ADDRESS: 3035 NE 208 STREET CITY-ST-ZIP: AVENTURA, FL 33180	<input type="checkbox"/> Delete	TITLE: MGRM NAME: STEAD, RICHARD STREET ADDRESS: 1981 NE 196 TERRACE CITY-ST-ZIP: MIAMI, FLORIDA, 33179	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: MGRM NAME: STEAD, ANA STREET ADDRESS: 3035 NE 208 STREET CITY-ST-ZIP: AVENTURA, FL 33180	<input type="checkbox"/> Delete	TITLE: MGRM NAME: STEAD, ANA STREET ADDRESS: 1981 NE 196 TERRACE CITY-ST-ZIP: MIAMI, FLORIDA, 33179	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>T.T.T.</u> RICHARD STEAD		Date: <u>4/8/05</u> Daytime Phone #: <u>305 937-0427</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			