


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000018272</b> 1. Entity Name 6374 MELBOURNE, LLC	
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Principal Place of Business 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33401	Mailing Address 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33401
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<b>DO NOT WRITE IN THIS SPACE</b>
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04212005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 81-0563473	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  MAPES, PAUL 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33406
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(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 METZ, JOHN 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33406
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<p>1100000359050 05/04/05-80137-020 50.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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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.		
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<b>SIGNATURE:</b> <i>Alan Hartstein</i> <b>ALAN HARTSTEIN</b>	<i>4/28/05</i> <b>4/28/05</b>	<i>561-296-1510</i> <b>561-296-1510</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>