

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019258

**FILED**  
**Aug 13, 2004**  
**Secretary of State**

**Entity Name:** 1164 ASSOCIATES, LLC

**Current Principal Place of Business:**

1164 EAST OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33306

**New Principal Place of Business:**

1164 EAST OAKLAND PARK BLVD  
SUITE 100  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

1164 EAST OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33306

**New Mailing Address:**

1164 EAST OAKLAND PARK BLVD  
SUITE 100  
OAKLAND PARK, FL 33334

FEI Number: 81-0563553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEBENEDICTIS, ROBERT N  
1164 EAST OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33306

**Name and Address of New Registered Agent:**

DEBENEDICTIS, ROBERT N  
1164 EAST OAKLAND PARK BLVD  
SUITE 100  
OAKLAND PARK, FL 33334

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.

SIGNATURE: ROBERT N DEBENEDICTIS

08/13/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: DEBENEDICTIS, ROBERT N  
Address: 39 GRAMERCY PARK  
City-St-Zip: NEW YORK, NY 10010

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ROBERT N DEBENEDICTIS

MGRM

08/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date