

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019499

Entity Name: 604 BUILDING LLC

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

999 PONCE DE LEON BLVD.
SUITE 625
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

999 PONCE DE LEON BLVD.
SUITE 625
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 72-1543422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARR, NEAL E
999 PONCE DE LEON BOULEVARD
SUITE 625
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: APPELROUTH, STEWART L
Address: 999 PONCE DE LEON BLVD, SUITE 625
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: APPELROUTH-FARR, EILEEN
Address: 11100 SW 64TH AVENUE
City-St-Zip: PINECREST, FL 33156 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: APPELROUTH-FARR, EILEEN
Address: 1623 MICANOPY AVENUE
City-St-Zip: MIAMI, FL 33133 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEWART L. APPELROUTH

MGMR

01/16/2009

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