FILED
Apr 29, 2005 08:00 AM
Secretary of State

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000022135

1. Entity Name
SWEET CITY, LLC

Principal Place of Business	Mailing Address
MISSION BAY PLAZA, 20423 STATE ROAD 7 F-3 BOCA RATON, FL 33498	MISSION BAY PLAZA, 20423 STATE ROAD 7 F-3 BOCA RATON, FL 33498

DO NOT WRITE IN THIS SPACE

04212005 No Chg-LLC CR2E083 (10/03)

4. FEI Number
91-2188198

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HERMESH, TSIPORA
MISSION BAY PLAZA, 20423 STATE ROAD 7
F-3
BOCA RATON, FL 33498

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when changing)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HERMESH, TSIPORA
STREET ADDRESS	20425 STATE ROAD 7, SUITE F-3
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/29/05-80092-011 50.00

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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 605, Florida Statutes.

SIGNATURE: Tsipi Hermesh (561)482-2121
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER, MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #