


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90033 040 \*\*\*\*50.00

**DOCUMENT # L02000022666**

1. Entity Name  
**SES REAL ESTATE, L.L.C.**



Principal Place of Business  
 13750 SW 34TH ST  
 MIAMI, FL 33175

Mailing Address  
 C/O IVAN A. GOMEZ, P.A.  
 601 BRICKELL KEY DRIVE, SUITE 07  
 MIAMI, FL 33131

**14002011**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 13750 S.W. 34th

Suite, Apt. #, etc.

04222005 Chg-LLC CR2E083 (10/03)

City & State  
 Miami, FL

City & State  
 Miami, FL

4. FEI Number  
 16-1631373

Applied For  
 Not Applicable

Zip  
 FL 33175

Country  
 USA

Zip  
 FL 33175

Country  
 USA

5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SANCHEZ, SANTIAGO**  
 13720 SW 34 ST  
 MIAMI, FL 33175

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL** Zip Code

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 *Santiago v Sanchez*  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**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 NAME STREET ADDRESS CITY-ST-ZIP	MGR SANCHEZ, SANTIAGO 13750 SW 34TH ST MIAMI, FL 33175 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: *Santiago v Sanchez* 4/27/05  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

*Manager*