2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000023078

1. Entity Name
CEDAR WEST HOMES III, LLC

Principal Place of Business	Mailing Address
1569 N.W. 82 AVENUE MIAMI, FL 33126	1569 N.W. 82 AVENUE MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

03012005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
16-1626098	Not Applicable

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

6. Name and Address of Current Registered Agent

RAMIREZ, ABEL
1569 N.W. 82 AVENUE
MIAMI, FL 33126

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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_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE
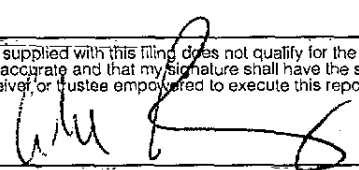
Filing Fee is $50.00
Due by May 1, 2005

9. **MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	JAXI BUILDERS INC.
STREET ADDRESS	1569 N.W. 82 AVENUE
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/14/05-80094-001 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 608, Florida Statutes

SIGNATURE: _____   3/10/2005   305-599-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #