2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Sep 01, 2004 08:00 AM Secretary of State

| DOCUMENT # L020000250 | 03 |
|------------------------------|-------|
| 1. Entity Name | |
| FIRST OCEAN RESIDENCE REALTY | . LLC |

Principal Place of Business 5930 NORTHBAY ROAD MIAMI BEACH, FL 33140 Mailing Address

5930 NORTHBAY ROAD MIAMI BEACH, FL 33140



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

07062004No Chg-LLC CR2E083 (10/03)

| 4. FEI Number 68-0564554 | Applied For Not Applicable |
|------------------------------|-------------------------------|
| 5. Certificate of Status De- | 5.00 Additional e Required |

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD 201 ALHAMBRA CIRCLE, SUITE 601 CORAL GABLES, FL 33134

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

| 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 September 8, 2004 | | | 000000171403 09/01/04-80005-005 50.00 |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR COHEN, LEON 40304 FISHER IS. DR., #40304 FISHER ISLAND, FL 33109 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Continued the Co | |
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| TITLE NAME STREET ADDRESS GITY-ST-ZIP | | | |
| 11. I hereby indicated | certify that the information supplied with this filing does not of on this report is true and accurate and that my signature spatials. | qualify for the exemption stated in Section 119.07(3)(i), all there the same legal effect as if made under oath; it | Florida Statutes. I further certify that the information that I am a managing member or manager of the |

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