

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90011 030 ****55.00

DOCUMENT # L02000025978

1. Entity Name
**RIVERBEND CORPORATE PARK OF FORT
LAUDERDALE, LLC**



Principal Place of Business
**2900 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065**

Mailing Address
**2900 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065**

24051899



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01192004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
APPLIED FOR 11-3691196

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**COLE, JAMES O
200 EAST BROWARD BLVD.
15TH FLOOR
FORT LAUDERDALE, FL 33301**

7. Name and Address of New Registered Agent

Name
Broward Barron, Inc.
Street Address (P.O. Box Number is Not Acceptable)
2900 University Drive
City
Coral Springs **FL** Zip Code
33065

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

George Rahael, President **4/16/04**

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BROWARD BARROW, INC.
2900 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
Broward Barron, Inc.
2900 University Drive
Coral Springs, FL 33065** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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.

Broward Barron, Inc.

**George Rahael
President**

SIGNATURE:

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

4/16/04

Date

954-753-9500

Daytime Phone #