2004 LIMITED LIABILITY COMPANY

SIGNATURE:

FILED ANNUAL REPORT Apr 28, 2004 08:00 AM Secretary of State **DOCUMENT # L02000027252** 1. Entity Name 1512 WASHINGTON, LLC Principal Place of Business Mailing Address 9903 NW 43 TERRACE 9903 NW 43 TERRACE MIAMI, FL 33178 MIAMI, FL 33178 04262004 No Chg-LLC CR2E083 (10/03) Applied For 4. FEI Number 74-3065019 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THE RESIDENCE OF THE PROPERTY OF THE PARTY O GIL, CARLOS L 9903 NW 43 TER. DO NOT WRITE MIAMI, FL 33178 IN THIS SPACE \$. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000134987 Filing Fee is \$50.00 04/28/04-80040-018 50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. TITLE NAME GIL, CARLOS STREET ADDRESS 9903 NW 43 TERRACE CITY-ST-ZIP MIAMI, FL 33178 TITLE STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 employed to execute this report as required by Chapter 608, Florida Statutes.

Daytime Phone #