## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

## Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # L02000029057 1. Entity Name SEABROOK PROPERTIES LLC Principal Place of Business Mailing Address **811 MALAGA AVENUE** 811 MALAGA AVENUE CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 CR2E083 (10/03) 03152005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0651604 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KLEIN, THEODORE J EŚQ. DO NOT WRITE 88 N.E. 168 STREET NORTH MIAMI BEACH, FL 33162 IN THIS SPACE 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 (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR 71717 WAGNER, ROBERT NAME STREET ADDRESS 811 MALAGA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134 U00000319312 04/20/05-80091-024 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CTTY -ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS CITY-ST-ZIP 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.

**FILED**