


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000030271 1. Entity Name CORAL CORNER MANAGEMENT, LLC	
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Principal Place of Business 3051 NE 48TH STREET, #706 FORT LAUDERDALE, FL 33308	Mailing Address 3051 NE 48TH STREET, #706 FORT LAUDERDALE, FL 33308
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04112004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0435587	Applied For Not Applicable
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5. Certificate of Status Due <i>N/A</i> <input type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent WAXMAN, RHODA 3051 NE 48TH STREET, #706 FORT LAUDERDALE, FL 33308
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DO NOT WRITE 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 <i>N/A</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE
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Filing Fee is \$50.00 Due by May 1, 2004	U000000126865 04/23/04-80050-018 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WAXMAN, RHODA 3051 NE 48 ST #706 FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIMON, RANDALL 1733 NE 35 ST FORT LAUDERDALE, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: <i>X</i> <i>Embell Simon</i> <i>Randall Simon</i> <i>member</i> <i>4-21-04</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date	Daytime Phone #
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954-528-3323