

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030537

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: WBP MIAMI ACQUISITIONS, LLC

## Current Principal Place of Business:

3250 MARY STREET, 307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

## New Principal Place of Business:

3250 MARY STREET  
307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

## Current Mailing Address:

3250 MARY STREET, 307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

## New Mailing Address:

3250 MARY STREET  
307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

FEI Number: 51-0435362

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRONIG, STEVEN C  
3250 MARY STREET, 307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

## Name and Address of New Registered Agent:

CRONIG, STEVEN C  
3250 MARY STREET  
307 CONTINENTAL PLAZA  
COCONUT GROVE, FL 33133

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.

SIGNATURE:

01/05/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: CRONIG, STEVEN  
Address: 3250 MARY ST. #307  
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR (X) Delete  
Name: SHOVAL, JUDD  
Address: 24 S. RIVER DR.  
City-St-Zip: WILKES BARRE, PA 18702

Title: MGR (X) Delete  
Name: LEZINSKI, WILLIAM  
Address: 24 S. RIVER DR.  
City-St-Zip: WILKES BARRE, PA 18702

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WBP MIAMI MANAGER IN, CORPORATED  
Address: 3250 MARY ST. #307  
City-St-Zip: COCONUT GROVE, FL 33133

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: STEVEN C. CRONIG

P/D

01/05/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date