

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000032713

1. Entity Name
THE NICHE AT 62ND ST. LLC



Principal Place of Business
2665 S. BAYSHORE DRIVE, SUITE 703
MIAMI, FL 33133

Mailing Address
2665 S. BAYSHORE DRIVE, SUITE 703
MIAMI, FL 33133

FILED
05 MAY -4 PM 5:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Roberts MAY 12 2005

2. Principal Place of Business

3. Mailing Address

Suite Apt. # etc

Suite Apt. # etc

City & State

City & State

Zip

Country

Zip

Country

04262005 Chg-LLC CR2E083 (10/03)

4. FEI Number
20-0470845

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WORLD CORPORATE SERVICES, INC
2665 SOUTH BAYSHORE DRIVE, STE 703
MIAMI, FL 33133

Name Mitchell S. Polansky

Street Address (P.O. Box Number is Not Acceptable)
2665 S. Bayshore Drive, #703

City Miami FL Zip Code 33133

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

Mitchell S. Polansky 4/29/05

Filing Fee is \$50.00
Due by May 1, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME BELSOL JOSE MANUEL
STREET ADDRESS 3483 CHASE AVENUE
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
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.

Jose Manuel Belsol

4/29/05 (305) 858-9900

SIGNATURE:

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

Date

Daytime Phone #