

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034348

FILED
Feb 27, 2004
Secretary of State

Entity Name: URBAN VENTURES REALTY SERVICES, LLC

Current Principal Place of Business:

2665 S. BAYSHORE DRIVE
SUITE 702
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

3550 N. MOORINGS WAY
COCONUT GROVE, FL 33133 US

Current Mailing Address:

2665 S. BAYSHORE DRIVE
SUITE 702
COCONUT GROVE, FL 33133 US

New Mailing Address:

3550 N. MOORINGS WAY
COCONUT GROVE, FL 33133 US

FEI Number: 65-1166062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE, 28TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVENUE
2ND FLOOR
CORAL GABLES, FL 33134 US

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: SALOMON B. ESQUENAZI, VICE PRESIDENT

02/27/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HARRIS, JAMES W MGR
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 702
City-St-Zip: COCONUT GROVE, FL 33133 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARRIS, JAMES W MGR
Address: 3550 N. MOORINGS WAY
City-St-Zip: COCONUT GROVE, FL 33133 US

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: JAMES W. HARRIS

MGR

02/27/2004

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