2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000002800

1. Entity Name
SHERIDAN 87 LLC

Principal Place of Business	Mailing Address
701 NW 62ND AVENUE, #110 MIAMI, FL 33216	701 NW 62ND AVENUE, #110 MIAMI, FL 33216

$ 50.—
9.—
$ 55.—

DO NOT WRITE IN THIS SPACE

01262005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
27-0043321	Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, JOSE A
701 NW 62ND. AVE #110
MIAMI, FL 33126

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GONZALEZ, JOSE A
STREET ADDRESS	701 NW 62ND AVE., #110
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
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CITY-ST-ZIP	

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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: _Jose A. Gonzalez_ 1-27-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #