


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000003105</b> 1. Entity Name TRAFALGAR/SHERIDAN 87 LLC	
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Principal Place of Business 701 NW 62ND. AVENUE 110 MIAMI, FL 33126	Mailing Address 701 NW 62ND. AVENUE 110 MIAMI, FL 33126
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**DO NOT WRITE IN THIS SPACE**



01262005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 80-0100792	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

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

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

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GONZALEZ, JOSE A 701 NW 62ND AVENUE, SUITE 110 MIAMI, FL 33126
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1100000206893  
02/01/05-80025-016 50.00

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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 #