2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003695

Entity Name: INDIAN CREEK 6580, L.L.C.

FILED Aug 10, 2004 Secretary of State

Date

(X) Change () Addition

LIER & TONCONOGY - G, &D, L.L.C.

17850 WEST DIXIE HWY #2B

NORTH MIAMI BEACH, FL 33160

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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TURNBERRY PLAZA 2875 N.E. 191ST STREET, SUITE 801 AVENTURA. FL 33180

Current Mailing Address: New Mailing Address:

TURNBERRY PLAZA 2875 N.E. 191ST STREET, SUITE 801 AVENTURA, FL 33180

FEI Number: 35-2195651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SERBER, DANIEL J ESQ. TURNBERRY PLAZA 2875 N.E. 191ST STREET, SUITE 801 AVENTURA, FL 33180

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.

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

SIGNATURE:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MEMBERS:

 Title:
 MGRM () Delete

 Name:
 LEVY HARA, FERNANDO

 Address:
 17850 WEST DIXIE HWY #2B

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 LIER, RAUL
 Name:

 Address:
 17850 WEST DIXIE HWY #2B
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 BORODOWSKI, MARCELO
 Name:

 Address:
 17850 WEST DIXIE HWY #2B
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 TONCONOGY, JULIO A
 Name:

 Address:
 17850 WEST DIXIE HWY #2B
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 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: DANIEL MINTZER AR 08/10/2004