

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90192 018 ****50.00

DOCUMENT # L03000004304					
1. Entity Name MIAMI GARDENS OUT PARCEL ACQUISITION, LLC					
Principal Place of Business OLD MILL PLAZA, STE. A 2100 HIGHWAY 35 SEA GIRT, NJ 08750			Mailing Address OLD MILL PLAZA, STE. A 2100 HIGHWAY 35 SEA GIRT, NJ 08750		
2. Principal Place of Business Miami Gardens Out Parcel Suite, Apt. #, etc. 8 Industrial way East 2nd fl City & State Eatontown NJ Zip 07704		3. Mailing Address Wharton Realty Group Suite, Apt. #, etc. 8 Industrial way E, 2nd floor City & State Eatontown NJ Zip 07704		24011474 	
01232004 Chg-LLC CR2E083 (10/03)		4. FEI Number 13-4235428		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent ANSBACHER, LEWIS ESQ C/O ANSBACHER & SCHNEIDER 5150 BELFORT ROAD SOUTH JACKSONVILLE, FL 32256	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing member Daniel Massry 8 Industrial way East 2nd floor Eatontown NJ 07704 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing member maril massry 8 Industrial way East 2nd floor Eatontown NJ 07704 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing member Isaac Massry 8 Industrial way E. 2nd fl Eatontown NJ 07704 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
SIGNATURE: _____ <i>maril massry</i> <i>2/4/04</i> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					