# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L03000004880

1. Entity Name **GEESY LLC** 



Principal Place of Business

20547 OLD CUTLER ROAD, UNIT 141

MIAMI, FL 33189

Mailing Address

20547 OLD CUTLER ROAD, UNIT 141 MIAMI, FL 33189

## **FILED** Apr 27, 2005 08:00 AM. Secretary of State



03172005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 06-1679029 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone I

6. Name and Address of Current Registered Agent

1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		IN THIS SPACE		
	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registere	red agent, or both, in the State of Florida. I am familiar with, and accept	_
SIGNATURE_	Signature, typed or printed name of registered agent and little if applicable.	(NOTE, Registered Agent signature required v	d when reinstaling) DATE	
Fi D	iling Fee Is \$50.00 ue by May 1, 2005			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR GOULBOURNE, RICHARD 20547 OLD CUTLER ROAD, UNIT 141 MIAMI, FL 33189			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby of indicated limited lia	certify that the information supplied with this filling does not on this report is true and accurate and that my signature shibility company or the receiver or trustee empowered to exerging	ualify for the exemption stated in Sec all have the same legal effect as if ma ute this report as required by Chapte	ection 119.07(3)(i), Florida Statutes, I further certify that the information nade under oath; that I am a managing member or manager of the ster 608, Florida Statutes.	

REMBER, OR AUTHORIZED REPRESENTATIVE