

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 SEP -6 AM 11:39

<b>DOCUMENT # L03000005306</b> 1. Entity Name <b>BAHIA HONDA REAL ESTATE INVESTMENTS IV, L.L.C.</b>					
Principal Place of Business <del>% 2450 SW 137TH AVE., SUITE 221</del> <b>MIAMI, FL 33175</b>				Mailing Address <del>% 2450 SW 137TH AVE., SUITE 221</del> <b>MIAMI, FL 33175</b>	
2. Principal Place of Business <b>4000 Ponce de Leon Blvd.</b> Suite, Apt. #, etc. <b>Suite 770</b> City & State <b>Coral Gables, FL</b> Zip <b>33146</b>		3. Mailing Address <b>4000 Ponce de Leon Blvd.</b> Suite, Apt. #, etc. <b>Suite 770</b> City & State <b>Coral Gables, FL</b> Zip <b>33146</b>		06292005    Chg-LLC    CR2E083 (10/03)	
4. FEI Number <b>41-2079487</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <del>A&amp;A REGISTERED AGENT, INC.</del> <del>2450 SW 137TH AVE., SUITE 221</del> <del>MIAMI, FL 33175</del>			7. Name and Address of New Registered Agent Name <b>A.M. Rojas, P.A.</b> Street Address (P.O. Box Number is Not Acceptable) <b>1985 NW 80 COURT</b> <b>Suite 201</b> City <b>Miami</b> <b>FL</b> Zip Code <b>33179</b>		
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 _____					
<b>Filing Fee is \$50.00</b> <b>Due by September 7, 2005</b>			<b>Make check payable to</b> <b>Florida Department of State</b>		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM <del>ADRIAN REAL ESTATE INVESTMENTS IV, INC.</del> <del>2450 SW 137TH AVE., SUITE 228</del> <del>MIAMI, FL 33175</del>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM <b>Bahia Honda Real Estate Investments IV, Inc.</b> <b>4000 Ponce de Leon Blvd. # 770</b> <b>Coral Gables, FL 33146</b>	
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	
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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 606, Florida Statutes.					
SIGNATURE: <u><i>Adrian Rojas</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date _____ Daytime Phone # _____					