

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005654

FILED
Jul 21, 2004
Secretary of State

Entity Name: RENAISSANCE POINTE, LLC

Current Principal Place of Business:

815 N.W. 57TH AVENUE, STE. 202
MIAMI, FL 33126

New Principal Place of Business:

1637 NW 27 AVENUE
200
MIAMI, FL 33125

Current Mailing Address:

815 N.W. 57TH AVENUE, STE. 202
MIAMI, FL 33126

New Mailing Address:

1637 NW 27 AVENUE
200
MIAMI, FL 33125

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ORTEGA, FRANCISCO J ESQ
5900 SW 73RD STREET, STE. 205
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: VELLOCCI, RALPH
Address: 815 N.W. 57TH AVENUE, STE. 202
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VELLOCCI, RALPH
Address: 1637 NW 27 AVENUE #200
City-St-Zip: MIAMI, FL 33125

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: RALPH VELOCCI

MGRM

07/21/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date