

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 10, 2004 8:00 am
Secretary of State

08-10-2004 90051 044 ****50.00

DOCUMENT # L03000006482 1. Entity Name CORAL REALTY INVESTMENT, LLC																																																	
Principal Place of Business 1515 UNIVERSITY DRIVE, SUITE 214 CORAL SPRINGS, FL 33071			Mailing Address 1515 UNIVERSITY DRIVE, SUITE 214 CORAL SPRINGS, FL 33071																																														
2. Principal Place of Business Suite, Apt. #, etc. Suite 203		3. Mailing Address Suite, Apt. #, etc. Suite 203																																															
City & State Zip _____ Country _____		City & State Zip _____ Country _____		07232004 Chg-LLC CR2E083 (10/03) 4. FEI Number 82058 9407																																													
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>																																															
6. Name and Address of Current Registered Agent KAPLAN, HAROLD E 1515 UNIVERSITY DRIVE, SUITE 214 203 CORAL SPRINGS, FL 33071			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ Suite 203 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 <u><i>Harold E. Kaplan</i></u> 8/5/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																	
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State																																															
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:45%;">NAME</td> <td style="width:40%;">STREET ADDRESS</td> <td style="width:10%; text-align: right;">Delete <input type="checkbox"/></td> </tr> <tr> <td></td> <td>Manager, Mark S. Shachner</td> <td>3100 Coral Hills Dr, Ste 207</td> <td></td> </tr> <tr> <td></td> <td></td> <td>Coral Springs, FL 33065</td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	Delete <input type="checkbox"/>		Manager, Mark S. Shachner	3100 Coral Hills Dr, Ste 207				Coral Springs, FL 33065		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:45%;">NAME</td> <td style="width:40%;">STREET ADDRESS</td> <td style="width:10%; text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>			TITLE	NAME	STREET ADDRESS	Change <input type="checkbox"/> Addition <input type="checkbox"/>																												
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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. Mark S. Shachner, Manager SIGNATURE: <u><i>[Signature]</i></u> 954-755-0111 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>																																																	

Attachment
HAROLD E. KAPLAN, M.H.A., J.D.
BOARD CERTIFIED HEALTH LAW ATTORNEY 24079338

MAILING ADDRESS:
P.O. Box 770081
CORAL SPRINGS, FLORIDA 33077-0081

COLONIAL PLACE
1515 UNIVERSITY DRIVE, SUITE 214
CORAL SPRINGS, FLORIDA 33071
TELEPHONE: (954) 345-6338
TELECOPIER: (954) 345-7299

ADMITTED: FLORIDA, NEW YORK
HEALTH, CORPORATE, BUSINESS
AND EMPLOYMENT LAW. MEDIATION

Via Certified Return Receipt # 7003 1010 0003 1337 1279

August 5, 2004

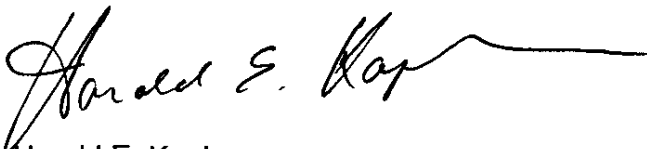
Division of Corporations
PO Box 6478
Tallahassee, Florida 32314

Re: CORAL REALTY INVESTMENT, LLC

To Whom It May Concern:

Enclosed please find the 2004 Limited Liability Company Annual Report for Coral Realty Investment, LLC, Document # L03000006482, and check #0084 in the amount of \$50.00, the fee to file the annual report.

Very truly yours,



Harold E. Kaplan

HEK:ci

CC: Mark S. Shachner, MD, Manager

Enclosure