

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90110 026 ****50.00

DOCUMENT # L03000009361

1. Entity Name

SILVER BLUE LAKE APTS., L.L.C.



Principal Place of Business

2677 N.W. 46TH STREET
BOCA RATON FL 33434-5843

Mailing Address

2677 N.W. 46TH STREET
BOCA RATON FL 33434-5843

2. Principal Place of Business

10421 NW 17th Ave

Suite, Apt. #, etc.

APT #105

City & State

MIAMI FL

Zip

33147

Country

USA

3. Mailing Address

5525 SW 41st St

Suite, Apt. #, etc.

APT #125

City & State

Pembroke Park FL

Zip

33023

Country

USA



MOORE

CR2E083 (11/03)

4. FEI Number

81-0609520

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FEINBERG, JEFFREY
4000 HOLLYWOOD BOULEVARD, SUITE 350-N
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name

FRANK ROSEN

Street Address (P.O. Box Number is Not Acceptable)

5525 SW 41st St

APT #125

City

Pembroke Park FL

Zip Code

33023

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

Frank Rosen

FRANK ROSEN - MANAGING MEMBER 1/26/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☒ Delete
NAME ROSEN, FRANK
STREET ADDRESS 2677 N.W. 46TH STREET
CITY-ST-ZIP BOCA RATON FL 33434-5843

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME FRANK ROSEN
STREET ADDRESS 5525 SW 41st St APT #125
CITY-ST-ZIP Pembroke Park FL 33023

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Frank Rosen FRANK ROSEN MANAGING MEMBER 954 347-4678
1/26/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #