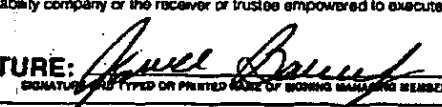


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

6/22
6/

FILED
Sep 14, 2004 8:00 am
Secretary of State

06-22-2004 90066 002 ****50.00

DOCUMENT # L03000011856			
1. Entity Name LIMOCH STIRLING, LLC			
Principal Place of Business 19495 BISCAYNE BLVD., SUITE 410 AVENUTRA, FL 33180		Mailing Address 19495 BISCAYNE BLVD., SUITE 410 AVENUTRA, FL 33180	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 58-2672513		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent REGISTERED AGENTS OF FLORIDA, LLC 100 SOUTHEAST 2ND STREET, SUITE 2900 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name JANICE BARNEY Street Address (P.O. Box Number is Not Acceptable) 14001 NW 4 ST City SUNRISE FL Zip Code 33325	
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 		DATE	
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Ken Israel PRES 19495 Biscayne Blvd Suite 410 Aventura FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Alan Lipton VP 19495 Biscayne Blvd Suite 410 Aventura FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		Date	
SIGNATURE AND TYPED OR PRINTED NAME OF BORROWING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone #	

34010393



Attachment 346103933
#L03000011856

Florida Department of State, Division of Corporations

Corporations Online
www.sunbiz.org Public Inquiry

Florida Limited Liability

LIMOCH STIRLING, LLC

PRINCIPAL ADDRESS

19495 BISCAYNE BLVD., SUITE 410
AVENUTRA FL 33180

MAILING ADDRESS

19495 BISCAYNE BLVD., SUITE 410
AVENUTRA FL 33180Document Number
L03000011856FEI Number
NONEDate Filed
04/02/2003State
FLStatus
ACTIVEEffective Date
NONELast Event
NAME CHANGE
AMENDMENTEvent Date Filed
04/08/2003Event Effective Date
NONETotal Contribution
0.00

Registered Agent

Name & Address

REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST 2ND STREET, SUITE 2900
MIAMI, FL 33131

Manager/Member Detail

Name & Address

Title

NONE

Annual Reports

attachment 340/10393
#L03000011856

Report Year

Filed Date

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Listed below are the images available for this filing.

04/08/2003 -- Name Change

04/02/2003 -- Florida Limited Liabilities

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