2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000013076

Entity Name
 SOKOL PROPERTIES, LLC



Principal Place of Business

Mailing Address

33 NE 2ND STREET

33 NE 2ND STREET

STE. 300

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

STE. 300 FORT LAUDERDALE, FL 33301

FORT LAUDERDALE, FL 33301

FILED Apr 30, 2005 08:00 AM Secretary of State



02252005 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number
	16-1672600

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SOKOL, ANDREW 33 NE 2ND STREET, #300

SIGNATURE:

DO NOT WRITE

FORT LAU	JDERDALE, FL 33301	IN .	IN THIS SPACE	
	named entity submits this statement for the purpose of chan tions of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and little if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2005		-	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOKOL, ANDREW 9421 SW 140TH STREET MIAMI, FL 33176			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000350130 05/02/05-80092-013 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby of indicated limited liab	certify that the information supplied with this filing does not gue on this report is true and accurate and that my signature shat billing company of the receiver or trustee empowered to execu	ralify for the exemption stated in Section 119.07(3) Il have the same legal effect as if made under out	(i), Florida Statutes. I further certify that the information it that I am a managing member or manager of the	