

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2004 8:00 am
Secretary of State

02-05-2004 90078 041 ****55.00

DOCUMENT # L03000013300 1. Entity Name ERB CAPITAL PARTNERS, L.L.C.					
Principal Place of Business 3540 SOUTH OCEAN BLVD., SUITE 116 SOUTH PALM BEACH, FL 33480			Mailing Address 3540 SOUTH OCEAN BLVD., SUITE 116 SOUTH PALM BEACH, FL 33480		
2. Principal Place of Business 1225 South Ocean Blvd		3. Mailing Address 1225 South Ocean Blvd			
Suite, Apt. #, etc. Apt # 703		Suite, Apt. #, etc. Apt # 703			
City & State Delray Beach, Florida		City & State Delray Beach, FL			
Zip 33483		Country USA		Zip 33483	
Country USA		4. FEI Number 73-1693458			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent BEEBE, HEATHER 12696 WESTPORT CR WEST PALM BEACH, FL 33414			7. Name and Address of New Registered Agent Name Avery R. Klann Street Address (P.O. Box Number is Not Acceptable) 1225 South Ocean Blvd Apt # 703 City Delray Beach FL Zip Code 33483		
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 <i>Margaret H Beebe</i> Margaret H Beebe 2/2/04 <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 May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEEBE, ARTHUR H 3540 SOUTH OCEAN BLVD., SUITE 116 SOUTH PALM BEACH, FL 33480	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Klann, Avery R. 1225 South Ocean Blvd Apt # 703 Delray Beach, FL 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Beebe, Edmund H 630 5th Avenue, 29th Floor New York, New York 10111	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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.					
SIGNATURE: <i>Avery Klann</i> Avery Klann 1-30-2004 561-703-8332 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

64000167



01302004 Chg-LLC CR2E083 (10/03)

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

7. Name and Address of New Registered Agent

Name Avery R. Klann
Street Address (P.O. Box Number is Not Acceptable)
1225 South Ocean Blvd
Apt # 703
City Delray Beach FL Zip Code 33483

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 Margaret H Beebe Margaret H Beebe 2/2/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

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10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Klann, Avery R. 1225 South Ocean Blvd Apt # 703 Delray Beach, FL 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: *Avery Klann* Avery Klann 1-30-2004 561-703-8332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #