

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015768

**FILED**  
**Apr 08, 2004**  
**Secretary of State**

**Entity Name:** SHAKED PROPERTIES, LLC

**Current Principal Place of Business:**

3983 194TH TRAIL  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3983 194TH TRAIL  
SUNNY ISLES, FL 33160

**New Mailing Address:**

FEI Number: 56-2359882

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KROOP, RICHARD ESQ.  
800 WEST AVE.  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

SHAKED, YARIV  
501 NE 190 ST  
SUNNY ISLES, FL 33160 US

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.

SIGNATURE: YARIV SHAKED

04/08/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: SHAKED, YARIV  
Address: 3983 194TH TRAIL  
City-St-Zip: SUNNY ISLES, FL 33160

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: YARIV SHAKED

MANG

04/08/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date