2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2004
Secretary of State

DOCUMENT# L03000016755

Entity Name: CITICONDOS, LLC

Current Principal Place of Business:

20801 BISCAYNE BOULEVARD
SUITE 403
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3610 YACHT CLUB DR.
APT # 1011
AVENTURA, 33180

New Mailing Address:

20801 BISCAYNE BOULEVARD
SUITE 403
AVENTURA, FL 33180

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CEVALLOS, DAVID F
20801 BISCAYNE BOULEVARD
SUITE # 403
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: CEVALLOS, DAVID F
Address: 3610 YACHT CLUB DR.
City-St-Zip: APT # 1011, FL 33180

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition
Name: BUITRAGO, BEATRIZ H
Address: 3610 YACHT CLUB DR.
City-St-Zip: APT # 1011, FL 33180

Title: MGR ( ) Change (X) Addition
Name: HARRELL, JOHN W
Address: 4182 SOUTH UNIVERSITY DR.
City-St-Zip: DAVIE, FL 33328

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: DAVID F. CEVALLOS MGR 02/11/2004

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