

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017890

FILED
Mar 23, 2005
Secretary of State

Entity Name: SUNSET PLACE APARTMENTS, LLC.

Current Principal Place of Business:

1016 NE 10TH STREET
APT # 1
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 66
HALLANDALE, FL 33008

New Mailing Address:

FEI Number: 16-1667212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNG, GABRIEL
1016 NE 10TH STREET
APT # 1
HALLANDALE, FL 33009 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: LUNG, PAUL
Address: 5449 N. LINDER AVE
City-St-Zip: CHICAGO, IL 60630

Title: MGR () Delete
Name: SINITEAN, JOHN PAUL
Address: 4828 N. NEW ENGLAND AVE.
City-St-Zip: CHICAGO, IL 60656

Title: MGR () Delete
Name: LUNG, GABRIEL
Address: 1016 NE 10TH STREET APT # 1
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

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

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

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: GABRIEL LUNG

MGR

03/23/2005

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