2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT							FILED				
DOCUMENT # L03000018791											
1. Entity Name BC KENDALL COMMONS, LLC					04 MAY 25 AH				8		
					E STOP	U	yes	F 57A	- 42 	60 m -	
Principal Place	of Business	Mailing Address				5. 1 TA	i dina	E FLOK	IJA	MJH	
5779 NW 151ST STREET 5779 NW 151ST STREET MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014						17.	•••			-	
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	ace of Business	3. Mailing Address									
Kullon Volumetto Frontage 2d 1440 Patroletto Front Buile, Apt. #, etc. Suite, Apt. #, etc.					4.					1 - Z	
<u> 31</u>	<u></u>	121				03262004	Chg-LLC	CR2E0	83 (10/03)	2/25	
City & State	Lakes, FI	City & State Mawl	La	ikes, f	Ė	4. FEI Numbe	·			plied Fbr t Applicable	
33016	Country	33016	Coun	try	_	5. Certificate	of Status Desired		\$5.00 Add Fee Required		
	6. Name and Address of Current			Nema		7. Name and	Address of New R	eglatered A	Igent		
CAPARROS, MARTIN JR					Name						
5779 NW 151ST STREET MIAMI LAKES, FL 33014				Street Address (P.O. Box Number is Not Acceptable)							
				-					T = 0 -4		
A 71				City			: P	FL	Zip Code		
	named entity submits this statement fo ons of registered agent.	ir the purpose or changing its re	gister	ed office or	register	ed agent, or bot	n. In the State of Fit	nga, lami	amıllar witn,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registere	d Agent signatu	reguirec	when reinstating)		DATE			
FI Di	ling Fee is \$50.00 ie by May 1, 2004							e check partm	ayable to ent of State	Ì	
9.	MANAGING MEMBE		10.		1./	- 12	ADDITIONS	CHANGES			
TITLE NAME	CAPARROS, MARTIN JR	☐ Defete	TITL NAM	_	,•	ros, Martin Jr.	ï		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	5779 NW 151ST STREET MIAMI LAKES, FL 33014			EET ADDRESS 7-ST-ZIP		Palmetto Fron i Lakes, Fl. 330					
TITLE		☐ Delete	πη		-		·· ·		Change	☐ Addition	
NAME STREET ADDRESS			NAM STR	AE Eet address (
CITY-ST-ZIP				Y-\$T-ZIP					<u> </u>		
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STREET ADDRESS CITY-ST-ZIP				EET ADDRESS Y-ST-ZIP		. 2	<u>ogos</u> z	nes	922		
TITLE		☐ Delete	ππ			9572	4/04 0102	4 00 2	Change	Addition	
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CITY-ST-ZIP	4			Y-51-ZIP							
TITLE NAME		☐ Delete	TITI						Change	☐ Addition	
STREET ADDRESS			STR	LEET ADDRESS							
TITLE		☐ Delete	CIT	Y-ST-ZIP LE		·	·· ·	 	☐ Change	☐ Addition	
NAME	•		NAI	ME							
STREET ADDRESS CITY-ST-ZIP				NEET ADORESS Y-ST-ZIP							
indicated	certify that the information supplied wit ton this report is true and accurate an	d that my signature shall have th	nse er	re legal effe	ict as if	made under oath	i; that I am a mana	I further cer	rtify that the i	nformation er of the	
	ability company or the receiver or truste							•			
SIGNAT	TURE:	~ /M	M	ton	(LOAR	08 4/3	d			
SIGITAL	SIGNATURE AND TYPED OR PRINTED NAME	of Bigning Managing Member, Man.	AGER, O	R AUTHORIZE	D REPRES	ENTATIVE	Date		Daytime Phone #		