

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000020414 1. Entity Name MIAMI BEACH POOLS, LLC	
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Principal Place of Business 1948 NE 123RD STREET 101 MIAMI, FL 33181 US	Mailing Address P.O. BOX 547005 SURFSIDE, FL 33154 US
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CR2F083 (10/03)

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4. FEI Number 56-2365151	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent PAONESSA, LOURDES 1948 NE 123RD STREET 101 N. MIAMI, FL 33181
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IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAONESSA, LOURDES 1948 NE 123RD STREET, SUITE 101 N. MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SERBOV, JORGE 1948 NE 123RD STREET, SUITE 101 N. MIAMI, FL 33181
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11. I hereby certify that the information supplied with this filing is true and accurate for the information provided in Section 410.07(2)(a), 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, and 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:  **03/11/05 305) 9811500**
SIGNATURE AND TYPED OR PRINTED NAME OF THE PERSON SIGNING THIS REPORT (NOTE: Signature of Registered Agent required when reinstalling)