

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 08, 2005 8:00 am**  
**Secretary of State**

02-08-2005 90076 013 \*\*\*\*50.00

**DOCUMENT # L03000022632**

1. Entity Name  
**CK AT WESTON, LLC**



Principal Place of Business  
**10800 BISCAYNE BLVD., SUITE 820  
BAYSHORE EXECUTIVE PLAZA  
NORTH MIAMI, FL 33161**

Mailing Address  
**10800 BISCAYNE BLVD., SUITE 820  
BAYSHORE EXECUTIVE PLAZA  
NORTH MIAMI, FL 33161**

00000000



01282005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3767592**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**MAHE DE BERDOUARE, CHRISTIAN  
10800 BISCAYNE BLVD., SUITE 820  
BAYSHORE EXECUTIVE PLAZA  
NORTH MIAMI, FL 33161**

**DO NOT WRITE  
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 reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
MAHE DE BERDOUARE, CHRISTIAN  
10800 BISCAYNE BLVD., SUITE 820  
NORTH MIAMI, FL 33161**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
SCOTTO, MARIA  
10800 BISCAYNE BLVD., SUITE 820  
NORTH MIAMI, FL 33161**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**2/1/2005 305-892-7878**

Date

Daytime Phone #

ATTACHMENT  
20008338**Division of Corporations****Annual Report**

The following is a review of the changes you are making for the filing of your Annual Report. Please verify the information for accuracy before submitting the document. Should you have additional corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again.

**Document Number** L03000022632  
**Business Entity Name** CK AT WESTON, LLC  
**FEI Number** 593767592  
**FEI Number Status** Current  
**Certificate of Status Desired** No

**Principal Place of Business**

**Address** 10800 BISCAYNE BLVD., SUITE 820  
**Suite, Apt. #, etc.** BAYSHORE EXECUTIVE PLAZA  
**City, State** NORTH MIAMI, FL  
**Zip Code & Country** 33161

**Mailing Address**

**Address** 10800 BISCAYNE BLVD., SUITE 820  
**Suite, Apt. #, etc.** BAYSHORE EXECUTIVE PLAZA  
**City, State** NORTH MIAMI, FL  
**Zip Code & Country** 33161

**Name And Address of Registered Agent**

**Name (Last, First, Middle, Title)** MAHE DE BERDOUARE, CHRISTIAN  
**Address** 10800 BISCAYNE BLVD., SUITE 820  
**Suite, Apt. #, etc.** BAYSHORE EXECUTIVE PLAZA  
**City, State** NORTH MIAMI, FL  
**Zip Code & Country** 33161 US  
**Registered Agent Signature** MAHE DE BERDOUARE CHRISTIAN

**Managing Member/Manager Name And Address**

**Title** MGRM  
**Name (Last, First, Middle, Title)** MAHE DE BERDOUARE, CHRISTIAN  
**Street Address** 10800 BISCAYNE BLVD., SUITE 820  
**City, State** NORTH MIAMI, FL  
**Zip Code & Country** 33161  
**Title** MGRM  
**Name (Last, First, Middle, Title)** SCOTTO, MARIA

ATTACHMENT

20068338  
103000622632  
10800 BISCAYNE BLVD., SUITE 820  
NORTH MIAMI, FL  
33161

Street Address

City, State

Zip Code & Country

Title

MGRM

Managing Member/Manager Signature MAHE DE BERDOUARE CHRISTIAN

Continue

Start Over

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