

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 23, 2004 8:00 am
Secretary of State

08-23-2004 90152 024 ****50.00

DOCUMENT # L03000023189

1. Entity Name

Florida Avenue 2957, LLC



Principal Place of Business

Mailing Address

1110 Brickell Avenue
Penthouse One
Miami, Florida 33131



01212004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1195562

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILVER, SCOTT A
1110 BRICKELL AVE. - PH ONE
SILVER, GARVETT & HENKEL, P.A.
MIAMI, FL 33131

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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 reinstating)

DATE

Filing Fees Due: \$50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mgr.
Scott A. Silver
1110 Brickell Avenue - Penthouse One
Miami, Florida 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mgr.
Fredric M. Garvett
1110 Brickell Avenue - Penthouse One
Miami, Florida 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

(Scott A. Silver)

305/
377-8802

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

Date 08/18/04 Daytime Phone #