## 2005 LIMITED LIABILITY COMPANY

## Aug 29, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # L03000031510** 08-29-2005 90039 043 \*\*\*\*50.00 SUCCESSFUL REAL ESTATE VENTURES, LLC Principal Place of Business Mailing Address 18940 S.W. 39TH COURT 18940 S.W. 39TH COURT MIRAMAR, FL 33029 MIRAMAR, FL 33029 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08032005 CR2E083 (10/03) City & State City & State 4. FEI Number Applied For 61-1460663 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILLER, ILIANA C Street Address (P.O. Box Number is Not Acceptable) 18940 S.W. 39TH COURT MIRAMAR, FL 33029 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 7, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITE ☐ Detete TITLE Change ☐ Addition MILLER, ILIANA C NAME NAME STREET ADDRESS 18940 S.W. 39TH COURT STREET ADDRESS MIRAMAR, FL 33029 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST=7/P CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 limited liability company or the receiver or and that my signature shall have the same legal effect as if made under oath; that I am a managing member ustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

CITY+ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

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

☐ Delete

☐ Delete

Change

☐ Change

☐ Addition

■ Addition

**FILED** 



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 4, 2005

SUCCESSFUL REAL ESTATE VENTURES, LLC 18940 S.W. 39TH COURT MIRAMAR, FL 33029

SUBJECT: SUCCESSFUL REAL ESTATE VENTURES, LLC

Ref. Number: L03000031518

We have received your document for SUCCESSFUL REAL ESTATE VENTURES, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$50.00.

The fee to file the limited liability company annual report/uniform business report form is \$50. Please include an additional \$5 for each certificate of status requested.

The document must be signed by a member or manager of the limited liability company.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 905A00050262