


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000034298  
 1. Entity Name  
 GLX PROPERTIES I LLC



Principal Place of Business ONE EAST BROWARD BLVD SUITE # 700 FT. LAUDERDALE, FL 33301 US	Mailing Address ONE EAST BROWARD BLVD SUITE # 700 FT. LAUDERDALE, FL 33301 US
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**DO NOT WRITE IN THIS SPACE**



04072005No Chg-LLC CR2E083 (10/03)

4. FEI Number 56-2392353	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 LAW OFFICES OF GISELLE LEONARDO P.A.  
 ONE EAST BROWARD BLVD  
 SUITE # 700  
 FT. LAUDERDALE, FL 33301

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LAW OFFICE OF G. LEONARDO P.A. ONE EAST BROWARD BLVD. SUITE 700 FORT LAUDERDALE, FL 33301
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 04/14/05-80054-011 50.00

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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)(f), 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: *Glennardo / Glennardo* Date: *4-1-05* Daytime Phone #: *954-728-9026*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE