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# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

APPROVED  
AND  
FILED

05 MAY 10 PM 7:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02102005 No Chg-LLC

CR2E083 (10/03)

*MRS*

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
02-0710587

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

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

FERRER, J.C.  
HARPER MEYER PEREZ & FERRER LLP  
701 BRICKELL AVE., STE. 1650  
MIAMI, FL 33131

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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

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	MGRG
NAME	EIROA, CHRISTIAN
STREET ADDRESS	4650 N.W. 74TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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

Q33e

Daytime Phone #

*Christian Eiroa* *EIROA* 2/14/05 305-592-0722