

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000038404

1. Entity Name
900 BISCAYNE, LLC



FILED
05 FEB 18 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1200 BRICKELL AVE., STE. 1840
MIAMI, FL 33131

Mailing Address
1200 BRICKELL AVE., STE. 1840
MIAMI, FL 33131

PK



01262005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 06-1711874	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ONETTO, RAIMUNDO
1200 BRICKELL AVE., STE. 1840
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TERRA-ARCHIPLAN 900 MANAGEMENT, LLC 1200 BRICKELL AVE., STE. 1840 MIAMI, FL 33131
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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: *PELRO A. MARTIN* PELRO A. MARTIN 2/16/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #