

FILED
Jul 19, 2004 8:00 am
Secretary of State

05-14-2004 90447 003 ****50.00

5/14/2004

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000040054

1. Entity Name
STUART COAST INVESTMENTS, LLC



Principal Place of Business
501 BRICKELL KEY DR., STE. 602
MIAMI, FL 33131

Mailing Address
501 BRICKELL KEY DR., STE. 602
MIAMI, FL 33131

34009350



2. Principal Place of Business

3. Mailing Address

1401 Brickell Avenue, Suite 500
Miami, FL 33131

1401 Brickell Avenue, Suite 500
Miami, FL 33131

05112004 Chg-LLC CR2E983 (10/03)

4. FEI Number **27-0074665**

Applied For
Not Applicable

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAZQUEZ, GERARDO A ESQ
501 BRICKELL KEY DR., STE. 602
MIAMI, FL 33131

Name
Vazquez, Gerardo A.
1401 Brickell Avenue, Suite 500
Miami, FL 33131
City FL Zip Code

8. The above named entity certifies 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.

Gerardo A. Vazquez, P.A.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when certifying)

DATE

Filing Fee is \$50.00
Due by September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGRM GUTIERREZ, EDUARDO
501 BRICKELL KEY DR., STE. 602
MIAMI, FL 33131 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
Gutierrez, Eduardo
1401 Brickell Avenue, Suite 500
Miami, FL 33131 ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGRM RODRIGUEZ, MAURICIO G
501 BRICKELL KEY DR., STE. 602
MIAMI, FL 33131 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGRM Rodriguez, Mauricio G
1401 Brickell Avenue, Suite 500
Miami, FL 33131 ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

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:

Gerardo A. Vazquez, P.A.

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

Date

Daytime Phone #