

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000790

FILED  
Jan 19, 2005  
Secretary of State

Entity Name: GOMEZ APARTMENTS, L.L.C.

**Current Principal Place of Business:**

6151 SW 156 CT  
MIAMI, FL 33193

**New Principal Place of Business:**

**Current Mailing Address:**

6151 SW 156 CT  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 71-0958913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRODIE, SIDNEY Z  
7270 NW 12TH ST, PH-I  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: GOMEZ, PEDRO  
Address: 6151 SW 156 CT  
City-St-Zip: MIAMI, FL 33193

Title: MGRM ( ) Delete  
Name: GOMEZ, CARMEN  
Address: 6151 SW 156 CT  
City-St-Zip: MIAMI, FL 33193

Title: MGRM ( ) Delete  
Name: GOMEZ, PEDRO D  
Address: 6151 SW 156 CT  
City-St-Zip: MIAMI, FL 33193

Title: MGRM ( ) Delete  
Name: GOMEZ, FRANCYS  
Address: 6151 SW 156 CT  
City-St-Zip: MIAMI, FL 33193

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: PEDRO GOMEZ

MR

01/19/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date