2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 15, 2005 8:00 am
Secretary of State
02-14-2005 90174 007 ****50.00

DOCUMENT # L04000001719

1. Entity Name
LHP INTRACOSTAL, LLC

Principal Place of Business	Mailing Address
2900 GLADES CIR, STE 350 WESTON, FL 33327	2900 GLADES CIR, STE 350 WESTON, FL 33327

2. Principal Place of Business	3. Mailing Address
SAME	SAME
Suite, Apt. #, etc.: 850	Suite, Apt. #, etc.: 850
City & State: SAME	City & State: SAME
Zip: SAME Country: SAME	Zip: SAME Country: SAME

01262005 Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0571830 ☐ Applied For ☐ Not Applicable

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
JOSE GREGORIO TOVAR ARIAS, TOVAR & ASSOC, PA WESTON TOWN CTR, 1735 MAIN ST, STE 209 WESTON, FL 33326	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BRICENO, RAUL 2900 GLADES CIR, STE 350 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME SAME	☒ Change ☐ Addition STE 850
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HERNANDEZ, LUIS 2900 GLADES CIR, STE 350 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME SAME	☒ Change ☐ Addition STE 850
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MARAVER, JOSE 2900 GLADES CIR, STE 350 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME SAME	☒ Change ☐ Addition STE 850
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SOSA, JUAN I 2900 GLADES CIR, STE 350 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME SAME	☒ Change ☐ Addition STE 850
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: _____ 02/04/05 954-349 0357
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #