

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 21, 2005 8:00 am
Secretary of State

03-08-2005 90027 015 ****50.00
04-19-2005 90020 034 ****50.00

DOCUMENT # L04000018743	
1. Entity Name 1520 TREASURE HOLDINGS L.L.C.	

Principal Place of Business ONE S.E. THIRD AVE, STE 2250 MIAMI, FL 33131	Mailing Address ONE S.E. THIRD AVE, STE 2250 MIAMI, FL 33131
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30004204



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

02172005 Chg-LLC CR2E083 (10/03)

4. FEI Number **96-0755556** 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	
AMKE REGISTERED AGENTS, L.L.C. 2250 SUNTRUST INTERNATIONAL CENTER ONE S.E. THIRD AVE. MIAMI, FL 33131		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.

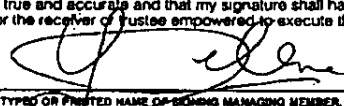
SIGNATURE _____ (NOTE: Registered Agent signature required when reselecting) DATE _____

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 DAYLIGHT MANAGEMENT LTD. 2250 SUNTRUST INT'L CTR, ONE SE THIRD AVE MIAMI, FL 33131 ☐ 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
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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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

03/03/05 3058646469 Date Daytime Phone #