

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2005 MAY -2 AM 10: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L04000025484					
1. Entity Name 105 NE 167TH STREET L.L.C.					
Principal Place of Business 10427 SW 284 STREET MIAMI, FL 33130			Mailing Address 10427 SW 284 STREET MIAMI, FL 33130		
2. Principal Place of Business 1800 SW 27th AVE Suite, Apt. #, etc. Suite 207 City & State Miami, Florida Zip 33145 Country USA		3. Mailing Address 1800 SW 27th AVE Suite, Apt. #, etc. Suite 207 City & State Miami, Florida Zip 33145 Country USA			
4. FEI Number 04292005 Chg-LLC CR2E083 (10/03)				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent LEMUS, OBDULIA 17502 SW 137TH COURT MIAMI, FL 33177			7. Name and Address of New Registered Agent Name Mario Sanchez JR. Street Address (P.O. Box Number is Not Acceptable) 1800 SW 27th AVE - Suite 207 City Miami FL Zip Code 33145		
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 <u>Mario Sanchez Jr.</u> DATE <u>4/29/05</u> <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
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	MGRM SANCHEZ, MARIO 10427 SW 284 STREET MIAMI, FL 33130	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Mario Sanchez Jr. 1800 SW 27th AVE - Suite 207 Miami, FL 33145	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LEMUS, OBDULIA 17502 SW 137TH COURT MIAMI, FL 33177	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Mario Sanchez Jr.</u> DATE <u>4/29/05</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					