


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90203 042 ****50.00

DOCUMENT # L04000033299 1. Entity Name GOODLUCK, L.L.C.					
Principal Place of Business TURNBERRY PLAZA, STE 801 2875 NE 191ST ST AVENTURA, FL 33180			Mailing Address TURNBERRY PLAZA, STE 801 2875 NE 191ST ST AVENTURA, FL 33180		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1195806	
				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			7. Name and Address of New Registered Agent		
SERBER, DANIEL J ESQ TURNBERRY PLAZA, STE 801 2875 NE 191ST ST AVENTURA, FL 33180			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 reinstating) _____ 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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
	<input type="checkbox"/>	MGRM RAUL PUCHETA 2875 NE 191 ST SUITE 801 AVENTURA FL 33181			
	<input type="checkbox"/>	MGRM CARLOS L. CATTANEO 2875 NE 191 ST SUITE 801 AVENTURA FL 33181			
	<input type="checkbox"/>	MGRM ANIBAL CONSTANZO 2875 NE 191 ST SUITE 801 AVENTURA FL 33181			
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
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: <i>RAUL PUCHETA</i> RAUL PUCHETA 03/07/05 (305) 932-6262 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					