

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90178 040 ***150.00

DOCUMENT # L04000049453	
1. Entity Name PUERTA DE PALMAS 1205 LLC	

Principal Place of Business 11581 NW 68TH TERRACE DORAL FL 33178	Mailing Address 11581 NW 68TH TERRACE DORAL FL 33178
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2. Principal Place of Business 7668 NW 116 AV	3. Mailing Address 7668 NW 116 AV
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State DORAL FL	City & State DORAL FL
Zip 33178	Country USA
City & State DORAL FL	City & State DORAL FL
Zip 33178	Country USA

20010481



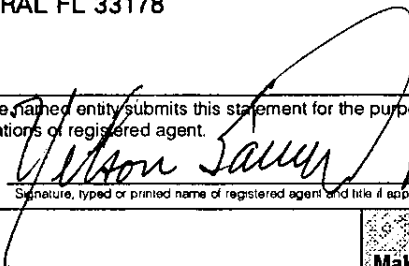
1st MOORE CR2E083 (10/04)

4. FEI Number 20-1871975	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent SANCHEZ, NELSON J 11581 NW 68TH TERRACE DORAL FL 33178	
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7. Name and Address of New Registered Agent Name NELSON J SANCHEZ Street Address (P.O. Box Number is Not Acceptable) 7668 NW 116 AV City DORAL FL Zip Code 33178	
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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  **NELSON J. SANCHEZ** DATE **Feb - 7 - 2005**

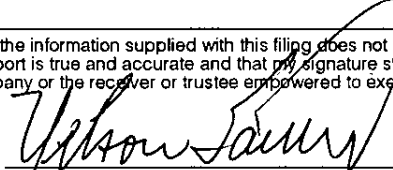
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005	
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ, NELSON J 11581 NW 68TH TERRACE DORAL FL 33178 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ, OLIMPIADES E 11581 NW 68TH TERRACE DORAL FL 33178 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VELASCO, OSWALDO 11581 NW 68TH TERRACE DORAL FL 33178 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ, FRANCISCO J 11581 NW 68TH TERRACE DORAL FL 33178 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ NELSON J 7668 NW 116 AV DORAL FL 33178 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ OLIMPIADES E 7668 NW 116 AV DORAL FL 33178 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VELASCO OSWALDO 7668 NW 116 AV DORAL FL 33178 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ FRANCISCO J 7668 NW 116 AV DORAL FL 33178 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  **NELSON J. SANCHEZ** Date **Feb 7/2005** Daytime Phone # **305-3022894**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE