

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026185

Entity Name: 685 SW 19 ROAD, LLC

FILED  
Mar 20, 2008  
Secretary of State

## Current Principal Place of Business:

2 GROVE ISLE DR. #1508  
COCONUT GROVE, FL 33133

## New Principal Place of Business:

7638 SW 54 AVENUE  
MIAMI, FL 33143

## Current Mailing Address:

2 GROVE ISLE DR. #1508  
COCONUT GROVE, FL 33133

## New Mailing Address:

P O BOX 347410  
CORAL GABLES, FL 33234

FEI Number: 20-2658656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MINTZ, LAWRENCE  
2 GROVE ISLE DRIVE  
#1508  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

MINTZ, LAWRENCE  
7638 SW 54 AVENUE  
MIAMI, FL 33143 US

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.

SIGNATURE: LAWRENCE MINTZ

03/20/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MINTZ, LAWRENCE  
Address: 2 GROVE ISLE DRIVE #1508  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: MGR ( ) Delete  
Name: CAMPBELL, MELISSA  
Address: 2 GROVE ISLE DRIVE #1508  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: MGRM ( ) Delete  
Name: FAMILY PROPERTIES PA, RTNERSHIP  
Address: 2 GROVE ISLE DRIVE #1508  
City-St-Zip: COCONUT GROVE, FL 33133 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MINTZ, LAWRENCE  
Address: 7638 SW 54 AVE  
City-St-Zip: MIAMI, FL 33143 US

Title: MGR (X) Change ( ) Addition  
Name: CAMPBELL, MELISSA  
Address: 7638 SW 54 AVE  
City-St-Zip: MIAMI, FL 33143 US

Title: MGRM (X) Change ( ) Addition  
Name: FAMILY PROPERTIES PA, RTNERSHIP  
Address: P.O.BOX 347410  
City-St-Zip: CORAL GABLES, FL 33234 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LAWRENCE MINTZ

PRES

03/20/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date