

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90116 049 \*\*\*\*\*50.00

**DOCUMENT # L94000000220**

1. Entity Name

JEFFERSON PLAZA MANAGEMENT, L.C.



Principal Place of Business

1501 COLLINS AVENUE, 3RD FLOOR  
MIAMI BEACH FL 33139

Mailing Address

1501 COLLINS AVENUE, 3RD FLOOR  
MIAMI BEACH FL 33139

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 **65-0446642**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SUMBERG, JOHN C P.A.  
200 SOUTH BISCAYNE BLVD., STE. 2500  
MIAMI FL 33131

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete  
NAME MEUNIER, JEAN-MARC  
STREET ADDRESS 1501 COLLINS AVENUE, 3RD FLOOR  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE MGR ☐ Delete  
NAME PIETRI, MARC  
STREET ADDRESS 1501 COLLINS AVENUE, 3RD FLOOR  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE MGR ☐ Delete  
NAME MOURRI, JACQUES  
STREET ADDRESS 1501 COLLINS AVENUE, 3RD FLOOR  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE MGR ☐ Delete  
NAME GARNERO, MARIO  
STREET ADDRESS 1501 COLLINS AVENUE, 3RD FLOOR  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE MGR ☒ Delete  
NAME KWIAT, ANDREW  
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE STE. 302  
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Change ☒ Addition  
NAME JACQUES BARBERA  
STREET ADDRESS 1501 COLLINS AVE  
CITY-ST-ZIP MIAMI BCH, FL-33139

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:** *JEAN MARC MEUNIER* 4/24/04 305-538-0135  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #