

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000173

**FILED**  
**Apr 29, 2004**  
**Secretary of State**

**Entity Name:** DE LAMADRID, LLC

**Current Principal Place of Business:**

1301 NW 89 CT., SUITE 208  
MIAMI, FL 33172

**New Principal Place of Business:**

4881 NW 109 CT  
MIAMI, FL 33183

**Current Mailing Address:**

1301 NW 89 CT., SUITE 208  
MIAMI, FL 33172

**New Mailing Address:**

4011 WEST FLAGLER STREET ST  
SUITE 503  
MIAMI, FL 33134

**FEI Number:** 98-0181765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FLORES, GABRIELA  
1301 NW 89 CT., SUITE 208  
MIAMI, FL 33172 US

**Name and Address of New Registered Agent:**

LAMADRID, VICTOR  
4881 NW 109 CT  
MIAMI, FL 33183 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: VICTOR LAMADRID

04/29/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: DE LAMADRID, ANGEL  
Address: 1301 NW 89 CT., STE 208  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DE LAMADRID, ANGEL  
Address: 4881 NW 109 CT  
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANGEL DE LA MADRID

D

04/29/2004

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