## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L98000002727

1. Entity Name

SHORECREST INVESTMENTS LLC



FILED Apr 26, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

11872 GRIFFING BOULEVARD BISCAYNE PARK, FL 33161 11872 GRIFFING BOULEVARD BISCAYNE PARK, FL 33161



04212004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-7133437

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

KELLEY, CHRISTOPHER P 11098 BISCAYNE BLVD., SUITE 205 MIAMI, FL 33161

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent	nging its registered office or registered agent, or both	, in the State of Florida, I am familiar with, and accep
SIGNATURE_	Signeture, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstalling)	DATE
Fi	ling Fee is \$50.00 ue by May 1, 2004		11022004 22077
9.	MANAGING MEMBERS/MANAGERS		100000127955
TITLE	MGRM		04/26/04-80019-011 55.00
NAME	ZULOAGA, JORGE L	1	
STREET ADDRESS	11872 GRIFFING BOULEVARD		
CITY-ST-ZIP	BISCAYNE PARK, FL 33161		
TITLE	MGRM		
NAME	SEDA, RODERICK S	<b>4</b>	
STREET ADDRESS	6700 WOODLAKE DRIVE, NE #101		
CITY-ST-ZIP	PALM BAY, FL 32905	Į.	
TITLE			
NAME		i	
STREET ADDRESS		) 50	NOT WOITE
CITY · ST · ZIP		טע	NOT WRITE
TITLE		IAL 7	THE CDACE
NAME		I 11N 1	THIS SPACE _
STREET ADDRESS		l l	
CITY-ST-ZIP			
IMLE			
NAME		i	
STREET ADDRESS			
CHY-ST-ZIP			
		<del></del>	
TITLE			
NAME CTREET ADDRESS			
STREET ADDRESS		l	
City-St-Zip	)	I	

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 1 further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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:
SIGNATURE AND TYPED OR PRINTED MAKE OF SKINING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/20/04

3055855389