

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**May 02, 2005 08:00 AM
Secretary of State**

DOCUMENT # L99000005512

1. Entity Name
PALM BEACH PLAZA ASSOCIATES, L.L.C.



Principal Place of Business
**2925 10TH AVENUE NORTH
LAKE WORTH, FL US**

Mailing Address
**C/O SCHUR MANAGEMENT CO., LTD.
2432 GRAND CONCOURSE
BRONX, NY 10458**



01172005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4082493

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHUR, ROBERT
5250 NORTH KENDALL DRIVE
CORAL GABLES, FL 33456-2124**

**DO NOT WRITE
IN THIS SPACE**

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SCHUR, LAWRENCE
2432 GRAND CONCOURSE
BRONX, NY 10458**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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05/04/05-80130-009 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: _____

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

Date

Daytime Phone #