2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M00000000094

1. Entity Name
SMITH PROPERTY HOLDINGS SUNSET POINTE WEST L.L.C.



FILED Apr 18, 2005 8:00 am Secretary of State 04-18-2005 90073 001 ****55.00

Suite, Apt. #, etc. City & State	Principal Place TRG-HOLLYW 2828 CORAL MIAMI, FL 33	/OOD,LTD. A . way,penth	TTN:ANGEL HERNANDEZ	Mailing Address TRG-HOLLYWOOD,LTD. ATTN:ANGEL HERNANDEZ 2828 CORAL WAY,PENTHOUSE SUITE MIAMI, FL 33145									
City & State Country Country Country S. Certificate of Status Desired S. Certificate of Status S. Certificate S. Certificate of Status Desired S. Certificate of St	2. Principal Place of Business			3. Mailing Address									
Country Zip Country Zip Country Zip Country S. Certificate of Status Desired S. S.0.0 Additional Fee Required S. Name and Address of Current Registered Agent T. Name and Address of New	Suite, Apt. #, etc.			Suite, Apt. #, etc.			02112005	Chg-	LLC	CR2E08	3 (10/03)		
S. Kernicated Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code The above named entity submits this statement for the purpose of changing its registered disce or registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent. SIGNATURE Signatur, need or printed make of registered agent and this is applicable. NOTE Registered disce or registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent. SIGNATURE Signatur, need or printed make of registered agent and this is applicable. NOTE Registered Agent agreeurs require when receiving make the registered agent of State Fluing Foe its SSO,00 Due by May 1, 2005 Name and Address of New Registered Agent City Signatur, need or printed make it applicable. NOTE Registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent. NoTE Registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent. NoTE Registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the he obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the head of the company of the State of Florida. National Registered Agents (P.O. Box Number is Not Acceptable) NOTE Registered Agents (P.O. Box Number is Not Acceptable) Note Agent Agent (P.O. Box Number is Not Acceptable) Note Agent Agent (P.O. Box Number is Not Acceptable) Note Agent Agent (P.O. Box Number is Not Acceptable) Note Agent Agent (P.O. Box Number is Not Acceptable) Note Agent (P.O. Bo	City & State			City & State							<u> </u>		
Name	Zip		Country Zip Cour			itry		5. Certificate	of Status	Desired			
BERNANDEZ, ANGEL 2828 CORAL WAY, PENTHOUSE SUITE MIAMI, FL 33145 City FL Zip Code		6. Name	and Address of Current R	<u> </u>			`	7. Name and Address of New Registered Agent					
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Signature	2828 COR	AL WAY, I											
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE						City	ity				Ei .	Zip Cod	le
9. MANAGING MEMBERS / MANAGERS 10. ADDITIONS / CHANGES Addition MARE MARE	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												
TITLE NAME TRG HOLLYWOOD, LTD SAZE CORAL WAY, PENTHOUSE SUITE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STR													
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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	NAME STREET ADDRESS			☐ Delete	NAM STRE	ET ADDRESS						☐ Change	☐ Addition
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	NAME STREET ADDRESS CITY-ST-ZIP			his filing does not qualify for	NAM STRE CITY	ET ADDRESS -ST-ZIP mption stated					I further certif	y that the i	nformation

ANGEL HERNANDEZ

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

VICE-PRESIDENT