


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

| | |
|---------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # M03000002908 |  |
| 1. Entity Name AG BUSCHWOOD 3, LLC | |

| | |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Principal Place of Business 701 EAST BYRD STREET, 15TH FLOOR RICHMOND, VA 23219 | Mailing Address 701 EAST BYRD STREET, 15TH FLOOR RICHMOND, VA 23219 |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------|



02042004No Chg-LLC CR2E083 (10/03)

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|-----------------------------------------------------------|---------------------------------------|
| 4. FEI Number 22-2180561 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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 title if applicable (NOTE Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

000070128830
04/26/04-80053-012 50.00

| 9. MANAGING MEMBERS/MANAGERS | |
|----------------------------------------------------|------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM PERKO REALTY CORP. 5301 N.W. 37TH AVENUE MIAMI, FL 33142 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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: Robert P. Dunne *Robert P. Dunne*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 3/21/04 Daytime Phone #: (305) 633-9779