

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 29, 2004 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # L00000012242 1. Entity Name ORIGINAL 1105-65 ENTERPRISES LLC |  |
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|---|---|
| Principal Place of Business 12900 S.W. 89TH COURT MIAMI, FL 33176 | Mailing Address 12900 S.W. 89TH COURT MIAMI, FL 33176 |
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01232004 No Chg-LLC CR2E083 (10/03)

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|---|---------------------------------------|
| 4. FEI Number 65-1067427 | 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

BERKOWITZ, RICHARD A
 ONE SOUTHEAST THIRD AVENUE, 15TH FLOOR
 MIAMI, FL 33131

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GARCIA, ROLANDO B 12900 SW 89TH COURT MIAMI, FL 33176 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GARCIA, MARIA E 12900 SW 89TH COURT MIAMI, FL 33176 |
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U00000020563
01/29/04-80071-015 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Rolando B Garcia* ROLANDO B. GARCIA 1/26/04 305-233-1322
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #