


2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Feb 05, 2004 8:00 am**  
**Secretary of State**

02-05-2004 90077 017 \*\*\*\*50.00

**DOCUMENT # L00000001455**

1. Entity Name  
SANRO INDUSTRIES AND TRADING, L.L.C.



Principal Place of Business  
11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410

Mailing Address  
11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410



01122004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0996600	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

PUMPHREY, GERALD ESQ.  
11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROJAS, RAUL 6800 SW 40TH ST PMB 118 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHIANG, JULIA VICTORIA 6800 SW 40TH ST PMB 118 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE 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)(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:** *Paul Rojas* - PAUL ROJAS 1/25/04 305-6207379

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #