


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 03, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000004909

1. Entity Name
MIDANI LLC



Principal Place of Business 15814 WEST STATE ROAD 84 FT. LAUDERDALE, FL 33326	Mailing Address 15814 WEST STATE ROAD 84 FT. LAUDERDALE, FL 33326
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DO NOT WRITE IN THIS SPACE



01192005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1016547	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

**PEARLMUTTER, NINA J
 15814 WEST STATE ROAD 85
 PLANTATION, FL 33326**

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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, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEARLMUTTER, NINA J 15814 WEST STATE ROAD 85 PLANTATION, FL 33326
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 02/03/05-80090-011 \$0.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Nina J. Pearlmutter* **1/30/2005**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #