2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

ANNUAL REPORT				. Secr	etary of State
DOCUMENT # L0000007203					emiy of State
t. Entity Name HAISFIELD FAMILY INVESTMENTS, LLC					
324 ROYAL	e of Business PALM WAY, SUITE 231 4, FL 33480	Mailing Address PO BOX 2771 PALM BEACH, FL 33480	·		
DO NOT WRITE IN THIS SPA				4. FEI Number 65-1106008	CR2E083 (10/03) Applied For Not Applicable \$5.00 Additional Fee Required
	6. Name and Address of Curre	nt Registered Agent	-		
HAISFIELD, MARC 324 ROYAL PALM WAY, SUITE 231 PALM BEACH, FL 33480			DO NOT WRITE IN THIS SPACE		
	ions of registered agent.	t for the purpose of changing its register		<u> </u>	i. I am familiar with, and accep
	Signature, typed or printed name of registered as	jent and title if applicable. (NOTE, Register	ed Agent signature required	when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			U00000137717 04/29/04-80051-022 50.00		
9.	MANAGING MEN	BERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGR HAISFIELD, MARC 324 ROYAL PALM WAY, SUIT PALM BEACH, FL 33480	TE 231		· <u></u>	
NAME STREET ADDRESS CHY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SP			CE
TITLE NAME					

11. I hereby certify that the information supplied with this filling 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 typistee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

JRE: Marc Haisteld Waraging
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE

Panagine Member 4/2

5616552829

Daytime Phone #