2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000008934

Entity Name

SONÍA BRAGA CUSTOM TAILOR, L.C.



FILED Jan 15, 2004 08:00 AM Secretary of State

Principal Place of Business

1880 SW 57 AVE

MIAMI, FL 33155

SIGNATURE

Mailing Address

1339 SW 22 TERR MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

01112004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1029695 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BENDER, HARRY K C/O BENDER, BENDER & CHANDLER, P.A. 5915 PONCE DE LEON BLVD., SUITE 60 CORAL GABLES, FL 33146

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 egent and title if applicable.	(NOTE Registered Agent signature required when reinstaking)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SONIA BRAGA BANNISTER 1339 S.W. 22 TERRACE MIAMI, FL 33145		U00000005241 01/15/04-80046-010 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BANNISTER, DAVID 1339 S.W. 22 TERRACE MIAMI, FL 33145		U1/15/U4-80046-U1U 50.UU
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			

IDITED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE