


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000013580 1. Entity Name SERVICES ON TIME, L.L.C.	
---	---

Principal Place of Business 7725 S.W. 155 PLACE, STE. 45 MIAMI, FL 33193	Mailing Address 7725 S.W. 155 PLACE, STE. 45 MIAMI, FL 33193
--	--

DO NOT WRITE IN THIS SPACE



04232004 No Chg-LLC	CR2E083 (10/03)
4. FEI Number 65-1053158	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

DIAZ RODRIGUEZ, MARTHA LIGIA
7725 S.W. 155 PLACE, STE. 45
MIAMI, FL 33193

**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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstalling)

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

000000136425
04/28/04-80090-016 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DIAZ RODRIGUEZ, MARTHA LIGIA 7725 SW 155 PLACE, #45 MIAMI, FL 33193
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	
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: Martha Ligia Diaz R. Martha Ligia Diaz Rodriguez 04/26/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #