


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

Feb 25, 2004 08:00 AM

Secretary of State

000000000000 L01000000209 1. Entity Name BANNER SUPPLY COMPANY POMPANO, LLC	
--	---

Principal Place of Business 1660 S.W. 13TH COURT POMPANO BEACH, FL 33069	Mailing Address 7195 N.W. 30TH ST MIAMI, FL 33122
--	---



0109200400 00000000

00 000000000000

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1071336	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 00000000 00000 000000

8. Name and Address of Current Registered Agent LANDERS, JACK 7195 N.W. 30TH ST MIAMI, FL 33122

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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

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


U000000055831

02/25/04-80053-015 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANDERS, JACK 7195 N.W. 30 ST MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANDERS, ARTHUR 7195 N.W. 30 ST MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COBLENTZ, DONALD 7195 NW 30 ST MIAMI, FL 33122
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:  **1/20/04** **305-593-2946**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #