2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 15, 2004 08:00 AM **DOCUMENT # L01000005582 Secretary of State** 1. Entity Name VIA TRENTO REALTY, LLC. Principal Place of Business Mailing Address 6523 VIA TRENTO 6523 VIA TRENTO DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446 03092004No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1096747 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LABARBERA, CIRO DO NOT WRITE 6523 VIA TRENTO DELRAY BEACH, FL 33446 IN THIS SPACE 5. 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 U00000089400 03/15/04-80090-008 5n.nn MANAGING MEMBERS/MANAGERS 9. MGRM TITLE LA BARBERA, CIRO NAME STREET ADDRESS 6523 VIA TRENTO CITY-ST-ZIP DELRAY BEACH, FL 33446 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 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 acquired 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.

TITLE NAME STREET ADDRESS CITY - ST-ZIP

IG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE