

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000019953

**FILED**  
**Feb 10, 2005**  
**Secretary of State**

**Entity Name:** CAINE & WEINER SOUTH, LLC

**Current Principal Place of Business:**

3550 BUSCHWOOD PARK DR #310  
TAMPA, FL 33618

**New Principal Place of Business:**

3350 BUSCHWOOD PARK DR #195  
TAMPA, FL 33618

**Current Mailing Address:**

15025 OXNARD ST., STE. 100  
VAN NUYS, CA 91411

**New Mailing Address:**

**FEI Number:** 02-0567776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: CAINE, ROBERT E  
Address: 15025 OXNARD ST # 100  
City-St-Zip: VAN NUYS, CA 91436

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ROBERT E. CAINE

MGRM

02/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date