

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000022516

1. Entity Name
TEX-MEM STRATEGIC LIGHT, LLC



Principal Place of Business
16410 MADDALENA PLACE
DELRAY BEACH, FL 33446

Mailing Address
16410 MADDALENA PLACE
DELRAY BEACH, FL 33446

FILED
04 FEB 17 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02052004 No Chg-LLC CR2E083 (10/03)

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4. FEI Number 75-2990417	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

KUKES, JEFFREY
16410 MADDALENA PLACE
DELRAY BEACH, FL 33446

**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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JJK MANAGER, INC.
STREET ADDRESS	16410 MADDALENA PLACE
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

JEFFREY KUKES

16410 MADDALENA PLACE
DELRAY BEACH, FL 33446
561 406 2100

Home Phone #