

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000933

FILED
Apr 15, 2004
Secretary of State

Entity Name: NATIONAL GROWTH MANAGEMENT, LLC

Current Principal Place of Business:

1140 NE 163RD STREET, SUITE 28
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1140 NE 163RD STREET, SUITE 28
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 48-1265926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NG, DORIS
1140 NE 163RD STREET, SUITE 28
NORTH MIAMI BEACH, FL 33162

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: NG, MANWARD
Address: 1140 NE 163 STREET, SUITE 28
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: NG, MANTIC
Address: 1140 NE 163 STREET, SUITE 28
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: NG, DAVID
Address: 1140 NE 163 STREET, SUITE 28
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: NG, DORIS
Address: 1140 NE 163 STREET, SUITE 28
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: NG, MANSON
Address: 1140 NE 163 STREET, SUITE 28
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES:

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

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

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

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

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: DORIS NG

MGRM

04/15/2004

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