


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 20, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000019360 1. Entity Name 3290 NORTHEAST 33RD STREET, LLC	
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Principal Place of Business 3200 NORTH OCEAN BOULEVARD, UNIT 509 FT LAUDERDALE, FL 33308	Mailing Address 3200 NORTH OCEAN BOULEVARD, UNIT 509 FT LAUDERDALE, FL 33308
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DO NOT WRITE IN THIS SPACE



03182004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 83-0355035	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

LEEDS, MARILYN
3200 NORTH OCEAN BOULEVARD, UNIT 509
FT LAUDERDALE, FL 33308

**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 reappointing) DATE _____

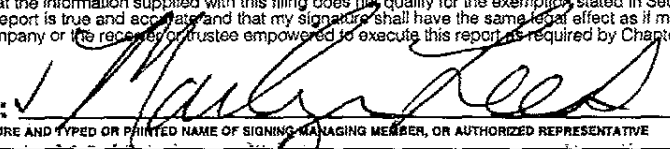
**Filing Fee is \$50.00
Due by May 1, 2004**

000000161030
05/20/04-80002-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LEEDS, MARILYN 3200 N OCEAN BLVD #509 FORT LAUDERDALE, FL 33308
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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:  **5/16/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #