


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000025538

1. Entity Name
JAKABOVITS ACQUISITION COMPANY, L.L.C.



Principal Place of Business 4901 NW 17 WAY # 103 FORT LAUDERDALE, FL 33309	Mailing Address 4901 NW 17 WAY # 103 FORT LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE

01252005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-1101736	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

**LEVY, ALAN
 4901 NW 17 WAY
 # 103
 FORT LAUDERDALE, FL 33-309***

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 re/instating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

U00000343907
 04/29/05-80112-020 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JAKABOWITZ, ERNO 4901 NW 17TH WAY #103 FORT LAUDERDALE, FL 33309
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **4/29/05** **954 491-5505**

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

Erno Jakabovits