


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90029 023 ****50.00

DOCUMENT # L02000034988 1. Entity Name SK JUSTICE, LLC	
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Principal Place of Business 155 S. MIAMI AVENUE PH-2A MIAMI, FL 33130	Mailing Address 155 S. MIAMI AVENUE PH-2A MIAMI, FL 33130
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24065278



01122004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0549461	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent Panther Realty Advisors Inc REGISTERED AGENTS OF FLORIDA, LLC 100 SOUTHEAST 2ND STREET STE. 2900 MIAMI, FL 33130		155 S. Miami Ave PH 2-A
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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.

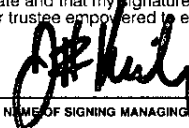
SIGNATURE  Jeff Krinsky, VP 4-26-04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIRLIN, DAN 155 S. MIAMI AVENUE, PH-2A MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KRINSKY, JEFF 155 S. MIAMI AVENUE, PH-2A MIAMI, FL 33130
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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:  Jeff Krinsky 4/26/04 305-394-5455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #