

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT


9/2/2004-90005-006-\$50.00-\$50.00

## FILED

04 OCT -6 AM 10:45

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJM

<b>DOCUMENT # L03000006302</b>			
1. Entity Name <b>ATRIUM, LLC</b>			
Principal Place of Business <b>520 BRICKELL KEY DR., STE. 0-305 MIAMI, FL 33131</b>		Mailing Address <b>520 BRICKELL KEY DR., STE. 0-305 MIAMI, FL 33131</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



08312004 Chg-LLC CR2E083 (10/03) 10/6

ESB Number **06-2405006** Applied For Not Applicable

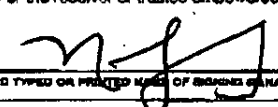
5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent <b>TRANSGLOBAL CORPORATE ADMINISTRATION, INC. 520 BRICKELL KEY DR., STE. 0-305 MIAMI, FL 33131</b>		7. Name and Address of New Registered Agent Name <b>Transglobal Corporate Administration LLC</b> Street Address (P.O. Box Number is Not Acceptable) <b>520 Brickell Key Dr.</b> <b>Ste 0-305</b> City <b>Miami</b> FL Zip Code <b>33131</b>	
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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  **Assistant Secretary Transglobal Corp Admin LLC** 8/31/04  
Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

Filing Fee is \$50.00 Due by September 8, 2004  
Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		<b>PI/mgr</b> <b>Joao Silveiro Azeredo Cantara</b> <b>520 Brickell Key Drive Ste. 0-305</b> <b>Miami, FL 33131</b>	
		<b>VP/mgr</b> <b>Sandra - Saturnina Pinto de Azeredo</b> <b>520 Brickell Key Drive Ste. 0-305</b> <b>Miami, FL 33131</b>	
		<b>AS</b> <b>Nicholas Stanham</b> <b>520 Brickell Key Drive Ste. 0-305</b> <b>Miami, FL 33131</b>	
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Nicholas Stanham** 8/31/04 305 374 3800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #