

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022697

Entity Name: 535 INVESTMENT, LLC

FILED
Jun 03, 2004
Secretary of State

Current Principal Place of Business:

8787 SOUTHSIDE BLVD
#4318
JACKSONVILLE, FL 32256

New Principal Place of Business:

535 CASSAT AVENUE
JACKSONVILLE, FL 32254 US

Current Mailing Address:

8787 SOUTHSIDE BLVD
#4318
JACKSONVILLE, FL 32256

New Mailing Address:

535 CASSAT AVENUE
JACKSONVILLE, FL 32254 US

FEI Number: 20-0061691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NGUYEN, CHUONG T
8787 SOUTHSIDE BLVD
#4318
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

NGUYEN, CHUONG T
2307 W. CLOVELLY LN
ST. AUGUSTINE, FL 32092 US

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: CHUONG NGUYEN

06/03/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: NGUYEN, CHUONG T
Address: 8787 SOUTHSIDE BLVD, #4318
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: LU, HIEP H
Address: 2439 SPRING BELL RD
City-St-Zip: JACKSONVILLE, FL 32246 US

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: CHUONG NGUYEN

MGRM

06/03/2004

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