

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046606

FILED
Apr 28, 2005
Secretary of State

Entity Name: SOPHIE'S CHOICE-4, L.L.C.

Current Principal Place of Business:

C/O LUIS SCHMIED
1433 PRESIDIO DR
WESTON, FL 33327

New Principal Place of Business:

7850 N.W. 146TH ST.
SUITE 502
MIAMI LAKES, FL 33016

Current Mailing Address:

C/O LUIS SCHMIED
1433 PRESIDIO DR
WESTON, FL 33327

New Mailing Address:

C/O PHILLIP B. RARICK
7850 N.W. 146TH ST., STE. 502
MIAMI LAKES, FL 33016

FEI Number: 20-1290326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RARICK, PHILLIP B
1496 BLUE JAY CIRCLE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

RARICK, PHILLIP B
7850 N.W. 146TH ST
SUITE 502
MIAMI LAKES, FL 33016 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: PHILLIP B. RARICK

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: RARICK, PHILLIP B
Address: 7850 N.W. 146TH ST., SUITE 502
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR () Change (X) Addition
Name: RUIZ, JUAN
Address: 1612 BLUE JAY CIRCLE
City-St-Zip: WESTON, FL 33327

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: PHILLIP B. RARICK

MGR

04/28/2005

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