

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90590 049 ****50.00


20020000



02242005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 94-3413294	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DOCUMENT # M01000002872
1. Entity Name
BIT INVESTMENT TWENTY-FIVE, LLC



Principal Place of Business 2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201	Mailing Address 2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HIQ CORPORATE SERVICES
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301

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 _____
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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MERCANTILE-SAFE DEPOSIT & TRUST COMPANY 2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201
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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)(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: *Deborah L. Davis* 3/1/05 410-237-5424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #