2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M03000004208

1. Entity Name
BIT INVESTMENT TWENTY-SIX, LLC



FILED Mar 24, 2004 08:00 AM Secretary of State

Principal Place of Business

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201 Mailing Address

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201



DO NOT WRITE IN THIS SPACE

02062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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 tide it applicable. (NOTE Registered Agent signature regulted when reinstating) DATE			
Filing Fee is \$50.00 Due by May 1, 2004 03/24/04-80038-002 58.00			
9.	MAÑAĞING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERCANTILE-SAFE DEPOSIT & TRUST COMPANY 2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		T NI	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TISLE NAME			

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE