2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M9700000345

1. Entity Name

MIDWEST CENTERS, LTD., A LIMITED LIABILITY COMPANY



FILED
May 03, 2004 08:00 AN
Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3307 CLIFTON AVENUE CINCINNATI, OH 45220

SIGNATURE:

SIGNATURE AND TYPED OF

3307 CLIFTON AVENUE CINCINNATI, OH 45220



04212004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 31-1173074 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KATZ, MARTIN V 625 NORTH FLAGLER DRIVE 9TH FLOOR WEST PALM BEACH, FL 33401-4025

DO NOT WRITE IN THIS SPACE

Date

Daytime Phone #

	enamed entity submits this statement for the purpose of chan tions of registered agent.	iging its registere	d office or registered agent, or bo	oth, in the State of Florida. I am fam	liar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent and title if applicable.			Agent signature required when reinstalling)	DATE		
	iling Foe is \$50.00 ue by May 1, 2004			, , , , , , , , , , , , , , , , , , , ,		
9.	MANAGING MEMBERS/MANAGERS	v -				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LIPSON, ALVIN 3307 CLIFTON AVENUE CINCINNATI, OH 45220			U00000152809 05/04/04-80100-014 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	N THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby certify that the information supplied with this filling 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 propriety of the state opposition to the report of the state of the limited liability company or the propriety of the state opposition of the limited liability company or the propriety of the state opposition of the limited liability company or the propriety of the state opposition of the limited liability of the state of the liability of the state of the limited liability of the state of the limited liability of the state of the liability of t						

ANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE