


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L99000008258
 1. Entity Name
 TAMPA BAY LIGHTING UNLIMITED, LLC



Principal Place of Business
 11113 N. DALE MABRY
 TAMPA, FL 33618

Mailing Address
 11113 N. DALE MABRY
 TAMPA, FL 33618



04302004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 74-2938696 Applied For
 (Not Applicable)

5. Certificate of Status Desired \$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent
 OSNOS, SAM
 11113 N. DALE MABRY
 TAMPA, FL 33615

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSNOS, SAM 11113 N. DALE MABRY TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSNOS, GAIL 11113 N DALE MABRY TAMPA, FL 33618
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 05/04/04-80148-022 50.00

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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)(f), 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: [Signature] Date: 4/30/04 Daytime Phone #: 813-963-0722
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE