

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000843

FILED
Sep 14, 2004
Secretary of State

Entity Name: CENETEC, L.L.C.

Current Principal Place of Business:

8000 N. FEDERAL HWY.
THIRD FLR.
BOCA RATON, FL 33487

New Principal Place of Business:

350 CAMINO GARDENS BOUELVARD
SUITE 102
BOCA RATON, FL 33432

Current Mailing Address:

8000 N. FEDERAL HWY.
THIRD FLR.
BOCA RATON, FL 33487

New Mailing Address:

350 CAMINO GARDENS BOUELVARD
SUITE 102
BOCA RATON, FL 33432

FEI Number: 06-1573442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARSCH, MICHAEL D
C/O SACH, SAX & KLEIN, P.A.
NO. TRUST PLAZA, STE 4150, 301 YAMATO RD.
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ADAMS, SCOTT
Address: 8000 N. FEDERAL HWY, 3 FLR
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM (X) Delete
Name: VECCIA, JOSEPH W
Address: 8000 N. FERERAL HWY, 3 FLR
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADAMS, SCOTT
Address: 350 CAMINO GARDENS BOUELVARD, STE 102
City-St-Zip: BOCA RATON, FL 33432

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SCOTT H. ADAMS

MGRM

09/14/2004

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