


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000003239 1. Entity Name THE MUSTARD SEED HOLDINGS, LLC	
---	---

Principal Place of Business 1440 CORAL RIDGE DRIVE, #331 CORAL SPRINGS, FL 33071	Mailing Address 1440 CORAL RIDGE DRIVE, #331 CORAL SPRINGS, FL 33071
--	--



04132004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FBI Number NOT APPLICABLE	Applied For Not Applicable
--	--------------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
---	---

6. Name and Address of Current Registered Agent AGOVINO, ANTHONY E 1440 CORAL RIDGE DRIVE, #331 CORAL SPRINGS, FL 33071

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.

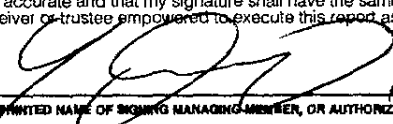
SIGNATURE _____ (NOTE: Registered Agent signature required when removing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARANGO, YOLANDA 1440 CORAL RIDGE DRIVE, #331 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AGOVINO, ANTHONY 1440 CORAL RIDGE DRIVE, #331 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000137191 04/28/04-80030-009 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
--

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. (954)

SIGNATURE:  **Yolanda Arango MGR 4/22/04 821-9022**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #