2005 LIMITED LIABILITY COMPA **ANNUAL REPORT**

DOCUMENT # L00000004331

ALLIANT EQUITY INVESTMENTS, LLC



Principal Place of Business

340 ROYAL POINCIANA WAY

SUITE 305

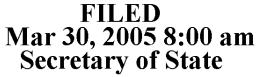
PALM BEACH, FL 33480

Mailing Address

340 ROYAL POINCIANA WAY

SUITE 305

PALM BEACH, FL 33480



03-30-2005 90159 014 ****50 00



 \Box

03012005 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (10/03)

4. FEI Number 95-4814777

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMLIN, CURTIS D ESQ. 1205 MANATEE AVE. W. BRADENTON, FL 34205

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В.	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 reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2005

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9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR BROWN, MICHAEL D 21550 OXNARD STREET STE 1020 21600 0 X nard St. WOODLAND HILLS, CA 91367 #1200		
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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
	certify that the information supplied with this filling does not qualify for the even		

DO NOT WRITE IN THIS SPACE

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 it rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF