

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004559

FILED
Jan 14, 2004
Secretary of State

Entity Name: MIAMI INVESTMENT MANAGEMENT ENTERPRISES, L.L.C.

Current Principal Place of Business:

P.O. BOX 173107
MIAMI, FL 33017

New Principal Place of Business:

Current Mailing Address:

PO BOX 173107
MIAMI, FL 33017

New Mailing Address:

FEI Number: 65-1003888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METH, TERRE A
P.O. BOX 173107
MIAMI, FL 33017

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: PALACINO, MARINEZ MGRM
Address: 20000 NE 14TH CT.
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: MGRM () Delete
Name: PENDL, DEBI MGRM
Address: 1916 N 37TH AVE.
City-St-Zip: HOLLYWOOD,, FL 33021 US

Title: MGRM () Delete
Name: METH, DAVID MGRM
Address: P.O. BOX 173107
City-St-Zip: MIAMI, FL 33107 US

Title: MGR () Delete
Name: METH, TERRE A MGR
Address: P.O. BOX 173107
City-St-Zip: MIAMI, FL 33017 US

Title: MGRM () Delete
Name: CROWE, DARLENE MGRM
Address: P.O. BOX 173107
City-St-Zip: NORTH MIAMI BEACH, FL 33169 US

Title: MGRM () Delete
Name: LARUSSO, TONII MGRM
Address: 10451 W BROWARD BLVD. #205
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

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

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

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

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

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

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: TERRE METH

MRS

01/14/2004

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