

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004815

FILED
Jan 14, 2004
Secretary of State

Entity Name: GATEWAY/ABSOLUTE VENTURE, L.C.

Current Principal Place of Business:

2430 WEST OAKLAND PARK BOULEVARD
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2430 WEST OAKLAND PARK BOULEVARD
FT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-1014488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, DAVID
2430 WEST OAKLAND PARK BOULEVARD
FT LAUDERDALE, FL 33311 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: STANTON, DAVID
Address: 2430 WEST OAKLAND PARK BOULEVARD
City-St-Zip: FT LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: WEINBERG, MICHAEL
Address: 2430 WEST OAKLAND PARK BOULEVARD
City-St-Zip: FT LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: CAMPANO, E. LUIS
Address: 2430 WEST OAKLAND PARK BOULEVARD
City-St-Zip: FT LAUDERDALE, FL 33311

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:

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: DAVID STANTON

MGMR

01/14/2004

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