2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Apr 28, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUI 1. Entity Nam MERSINA			Secretary of State
C/O ATLANTI 645 E. DANI	te of Business Mailing Address IA HOLDINGS C/O ATLANTIA HOLDINGS A BCH. BLVD. 645 E. DANIA BCH. BLVD. H, FL 33004 DANIA BEACH, FL 33004		
DO NOT WRITE IN THIS SPACE			01212005 No Cfig-LLC
BLACKBURN, ACE J JR COONEY MATTSON LANCE BLACKBURN RICHARDS 2312 WILTON DR FORT LAUDERDALE, FL 33305 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 Signature typed or printed name of registered agent and title if epolicable (NOTE: Registered Agent signature required when reinstating) DATE Filling Fee is \$50.00 Due by May 1, 2005			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGRM BLACKBURN, A. JR 645 E DANIA BCH BLVD DANIA BEACH, FL 33004		U0000033 947 5 04734705-80 078-008 50.0 0
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-IN THIS SPACE
TITLE NAME STREET ADDRESS GITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			