


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000008453
 1. Entity Name
MADURA & TEMPLETON, CERTIFIED PUBLIC ACCOUNTANTS, PL



Principal Place of Business 2133 NORTHWEST 5TH STREET BOCA RATON, FL 33486	Mailing Address 2133 NORTHWEST 5TH STREET BOCA RATON, FL 33486
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DO NOT WRITE IN THIS SPACE



03162004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1026119	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
SINGER, BERNARD A
 4925-A SHERIDAN STREET
 HOLLYWOOD, FL 33021

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 reinstating) DATE _____

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

U000000092818
 03/19/04-80024-007 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MADURA, MARY 2133 NORTHWEST 5TH STREET BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S TEMPLETON, DIANE 7985 SW 165TH STREET MIAMI, FL 33157
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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *Mary Madura* **3/16/2004** **561-338-5084**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #