2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000011413

t. Entity Name

M & A OF SARASOTA, LLC

Principal Place of Business

4911 SABAL LAKE CIR. SARASOTA, FL 34238 Mailing Address

4911 SABAL LAKE CIR. SARASOTA, FL 34238

FILED May 03, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04152004 No Chg-LLC

- CR2E083 (10/03)

4. FEI Number 65-1048751 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

GERA, ALEXANDER 4911 SABAL LAKE CIR. SARASOTA, FL 34238

DO NOT WRITE IN THIS SPACE

8. The above the obligati	named entity submits this statement for the purpose of char- ions of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GERA, ALEXANDER 4911 SABAL ŁAKE CIR. SARASOTA, FL 34238		U00000150697 05/04/04-80017-007 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GERANE, MARGIT S DR. 4911 SABAL LAKE CIR. SARASOTA, FL. 34238		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE MAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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 firsted flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.