2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000013645

1. Entity Name
REXZY VENTURES, LLC

Principal Place of Business	Mailing Address
14030 SW 145 TERR MIAMI, FL 33186	14030 SW 145 TERR MIAMI, FL 33186

07072004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1054597
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LLANES, MILDREY
14030 S W 145 TERR
MIAMI, FL 33186

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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: Mildrey Llanes Mildrey Llanes, MGRM 7-8-04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 8, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	LLANES, MILDREY
STREET ADDRESS	14030 SW 145 TERR.
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	MEM
NAME	LLANES, MANUEL
STREET ADDRESS	14030 SE 145 TERR.
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/12/04-80005-006 55.00

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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.

SIGNATURE: Mildrey Llanes Mildrey Llanes, MGRM 7-8-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #