

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000014047 1. Entity Name MIRA, LLC	
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Principal Place of Business 9625 WES KEARNEY WAY RIVERVIEW, FL 33569	Mailing Address 9625 WES KEARNEY WAY RIVERVIEW, FL 33569
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DO NOT WRITE IN THIS SPACE



03102004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3685904	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent HARRIS, TRACY J JR. 9625 WES KEARNEY WAY RIVERVIEW, FL 33569

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 _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARRIS, TRACY J JR 701 INDIANA AVENUE PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BING, KEARNEY 911 SEDDON COVE WAY TAMPA, FL 33602
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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 *Tracy J Harris* 4/26/04 813/621-7434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #