2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# L00000014253

Entity Name: LIMITED PARTNERSHIP CLEARING SERVICES, LLC

Current Principal Place of Business:

2805 SW 22ND AVENUE
SUITE 105 BLDG 9
DELRAY BEACH, FL 33445

New Principal Place of Business:

2935 SW 22ND AVE.
STE 106, BLDG. 19
DELRAY BEACH, FL 33445

Current Mailing Address:

2805 SW 22ND AVENUE
SUITE 105 BLDG 9
DELRAY BEACH, FL 33445

New Mailing Address:

2935 SW 22ND AVE.
STE 106, BLDG. 19
DELRAY BEACH, FL 33445

FEI Number: 65-1098222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SARIAN, CHRIS
2805 SW 22ND AVE.
SUITE 105, BLDG. 9
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

SARIAN, CHRIS
2935 SW 22ND AVE.
STE 106, BLDG. 19
DELRAY BEACH, FL 33445 US

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.

SIGNATURE: CHRIS SARIAN 04/05/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: SARIAN, CHRIS
Address: 2805 SW 22ND AVENUE SUITE 105 BLDG 9
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SARIAN, CHRIS
Address: 2935 SW 22ND AVE., STE 106, BLDG. 19
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: CHRIS SARIAN MGR 04/05/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date