2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000015976 --

1. Entity Name EPKE INVESTMENTS, L.L.C.



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

Principal Place of Business 1425 MIDDLE RIVER DR. FT LAUDERDALE, FL 33304 Mailing Address

SIGNATURE AND TYPED OR PRUSTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

P.O. BOX 24943 C/O BANTA

FT LAUDERDALE, FL 33307-4943

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

BANTA, MARY L 1425 MIDDLE RIVER DR. FT LAUDERDALE, FL 33304

DO NOT WRITE IN THIS SPACE

4-5-04

954-566-0759

Osvime Phone #

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			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BANTA, MARY L 1425 MIDDLE RIVER DR. FT LAUDERDALE, FL 33304		U00000153827 05/04/04-80142-013 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			US/U4/U4-8U142-U13 SU.UU
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
NAME STREET ADDRESS CITY-SY-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling 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.			