

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000370

FILED
Feb 23, 2004
Secretary of State

Entity Name: DIFIORE INVESTMENTS, L.L.C.

Current Principal Place of Business:

750 S.W. 17TH AVE.
DELRAY BEACH, FL 33444

New Principal Place of Business:

4801 LINTON BLVD., #11A
DELRAY BEACH, FL 33445

Current Mailing Address:

4801 LINTON BLVD., #11A
#643
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 65-1065073 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TORCHIN, DAVID C.P.A.
8211 WEST BROWARD BLVD.
SUITE 200
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

DI FIORE, CHRISTINE M C.P.A.
8220 STATE ROAD 84
SUITE 200
DAVIE, FL 33324 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: CHRISTINE M. DI FIORE

02/23/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CASALE, DONATO W
Address: 4801 LINTON BLVD., #11A, #643
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DONATO WALTER CASALE

MGR

02/23/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date