

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000469

FILED
May 02, 2005
Secretary of State

Entity Name: CAPTURE SYSTEMS, LLC

Current Principal Place of Business:

11150 SW 160TH CT
MIAMI, FL 33196 US

New Principal Place of Business:

Current Mailing Address:

11150 SW 160TH CT
MIAMI, FL 33196 US

New Mailing Address:

FEI Number: 59-3702036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FERNANDEZ, JORGE
11150 SW 160TH CT
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FERNANDEZ, JORGE
Address: 11150 SW 160 CT
City-St-Zip: MIAMI, FL 33196

Title: MGRM (X) Delete
Name: WACKERHAGEN, JERRY
Address: 11150 SW 160TH CT
City-St-Zip: MIAMI, FL 33196 US

Title: MGRM (X) Delete
Name: FERRER, RENE
Address: 11150 SW 160TH CT
City-St-Zip: MIAMI, FL 33196 US

ADDITIONS/CHANGES:

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

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

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: JORGE FERNANDEZ

MGRM

05/02/2005

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