

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002694

FILED
Apr 30, 2004
Secretary of State

Entity Name: PHOENIX RESTRUCTURING GROUP, LLC

Current Principal Place of Business:

5215 N. LOIS AVE.
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

5215 N. LOIS AVE.
TAMPA, FL 33614

New Mailing Address:

FEI Number: 65-1076428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOROWITZ, MITCHELL I ESQ.
501 E. KENNEDY BLVD., STE. 1700
TAMPA, FL 33602 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: MGR () Delete
Name: JASPERSON, JAY L
Address: 5215 N. LOIS AVE.
City-St-Zip: TAMPA, FL 33614

Title: MGR () Delete
Name: JASPERSON, MARK D
Address: 5215 N. LOIS AVE.
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES:

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: MARK JASPERSON

MGR

04/30/2004

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