

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003128

FILED
Apr 29, 2004
Secretary of State

Entity Name: OLIVE ENTERPRISES II, LLC

Current Principal Place of Business:

3357 RAMBLEWOOD COURT
SARASOTA, FL 34237

New Principal Place of Business:

1181 SUMTER BLVD
108
NORTH PORT, FL 34287

Current Mailing Address:

3357 RAMBLEWOOD COURT
SARASOTA, FL 34237

New Mailing Address:

1181 SUMTER BLVD
108
NORTH PORT, FL 34287

FEI Number: 65-1095953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSIOGAS, DIMITRIOS
3357 RAMBLEWOOD COURT
SARASOTA, FL 34237

Name and Address of New Registered Agent:

TSIOGAS, DIMITRIOS
1181 SUMTER BLVD
108
NORTH PORT, FL 34287

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: DIMITRIOS TSIOGAS

04/29/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TSIOGAS, DIMITRIOS
Address: 3357 RAMBLEWOOD COURT
City-St-Zip: SARASOTA, FL 34237

Title: MGRM () Delete
Name: REILLY, ROBERT M
Address: 515 OSPREY AVE
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TSIOGAS, DIMITRIOS
Address: 1181 SUMTER BLVD
City-St-Zip: NORTH PORT, FL 34287

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: DIMITRIOS TSIOGAS

MGRM

04/29/2004

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