2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP
CITY-ST-ZIP

FILED Jan 16, 2004 08:00 AM Secretary of State

DOCUMENT # L01000003638 1. Entity Name PRAY FIRST, LLC			Secretary of State	
Principal Place of Business 8000 N.W. 68TH ST. MIAMI, FL 33166	Mailing Address 8000 N.W. 68TH ST. MIAMI, FL 33166			
			01122004 No Chg-LLC CR2E083 (10/03)	
DO NOT W	ACE	4. FEI Number 65-1083897	Applied Fo	
			5. Certificate of Status Desired	\$5.00 Additional Fee Required
The above named entity submits this the obligations of registered agent.	statement for the purpose of changing its regis	stered office or registe	IN THIS SF	
SIGNATURE Signature, typed or priviled name of a	agistered agent and title it applicable (NOTE. Regi	Stered Agent signature require	d when reinstating)	DATE -
Filing Fee is \$50.00 Due by May 1, 2004				
9. MANAG	ING MEMBERS/MANAGERS			• •
NAME MALONE, JILL ANN	•		-x	
STREET ADDRESS 8000 N.W. 68TH ST.				· -
CITY-ST-ZIP MIAMI, FL 33166			- UNADAO	ന്റെല് ച
TITLE				006634 88047-003 SD.DÕ
STREET ADDRESS			we will as half a few a	www.it And Makephys
CRY-ST-ZIP			•••	
HANGE			•	
NAME STREET ADDRESS			00 1107 11	7 2

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Done

Denote Prome 4