## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Mar 11, 2005 08:00 AM Secretary of State

t. Entity Nan SIRGAN	Y NEWS, LLC		Secreta	Ty of State
6910 NW 12 MIAMI, FL 3		ET .	î 1821 MÎL MIL 8810 MÎL 3811 AVII MÎL 1821 BYÎN Î	iii PBila Birar Wilbar IIf labi
		Į.	01112005 No Chg-LLC CR2E0	083 (10/03)
	OO NOT WRITE IN THIS S	SPACE	4. FEI Number 65-0883220	Applied For Not Applicable
	6. Name and Address of Current Registered Agent			\$5.00 Additional Fee Required
	AYMOND J JR. 12TH STREET 33126		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE				
Filing Fee is \$50.00 Due by May 1, 2005				
9. TITLE	MANAGING MEMBERS/MANAGERS		g separation of the state of the	
NAME STREET ADDRESS CITY-ST-ZIP	ENTERPRISES, RJKAYAL 6910 NW 12TH STREET MIAMI, FL 33126		U00000259493 03/11/05-80026-0	16 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CRY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			The state of the s	
11. I hereby certify that the information supplied with this filling 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: 13/08/05 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Due Deputing Prints #				