


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000009039 1. Entity Name SUSIESBEEP, L.L.C.	
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Principal Place of Business 680 GRACKLE DRIVE CASSELBERRY, FL 32707	Mailing Address 680 GRACKLE DRIVE CASSELBERRY, FL 32707
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DO NOT WRITE IN THIS SPACE



03112004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3729810	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ANDREW, MICHAEL W JR. 10506 DOWN LAKEVIEW CIRCLE WINDERMERE, FL 34786
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**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, 2004**

U00000095378
03/24/04-80030-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ANDREW, CAROLYN S 680 GRACKLE DRIVE CASSELBERRY, FL 32707
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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: Carolyn S. Andrew 3/30/04 407-695-8436
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #