

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009461

FILED
Feb 12, 2004
Secretary of State

Entity Name: MAXIBELL L.L.C.

Current Principal Place of Business:

9250 S.W. 69TH STREET
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9250 S.W. 69TH STREET
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-1116949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABUN, SARA C
9250 S.W. 69TH STREET
MIAMI, FL 33173

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: MGRM () Delete
Name: BABUN, SARA C
Address: 9250 S.W. 69TH STREET
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: MUSTELIER-BABUN, SARA R
Address: 9250 S.W. 69TH STREET
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: GOMEZ, MARY B
Address: 9250 SW 69 STREET
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: GOMEZ, MARY BELL
Address: 9250 SW 69 STREET
City-St-Zip: MIAMI, FL 33173

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: MARY BELL GOMEZ

MGR

02/12/2004

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