


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000009826	
1. Entity Name BULLETPROOF MANAGEMENT LC	

Principal Place of Business 22301 SW 109 COURT SOUTH MIAMI, FL 33170	Mailing Address 1035 NE 125TH STREET SUITE 101 MIAMI, FL 33161
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01062004 No Chg-LLC

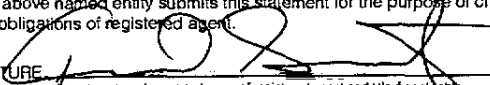
CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0904298	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 SWEETING, JOSEPH L 22301 S.W. 109 COURT SOUTH MIAMI, FL 33170

DO NOT WRITE IN THIS SPACE

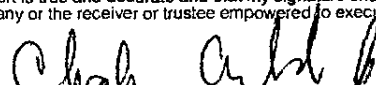
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 1-6-04
<small>(NOTE: Registered Agent signature required when reinstating)</small>	

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARNOLD, CHARLES 4340 NW 187 STREET MIAMI, FL 33056
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000000011548
01/23/04-H0042-001 50.00

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: 	DATE 1/6/04	DAYTIME PHONE # 305-891-9080
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		