2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000010335

1. Entity Name PARAMOUNT BOCA, LLC

Principal Place of Business

5000 T-REX AVE.

SUITE 150 BOÇA RATON, FL 33431 Mailing Address

5000 T-REX AVE.

SUITE 150

BOCA RATON, FL 33431

FILED Apr 29, 2004 08:00 AM Secretary of State



04222004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1123968

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHMAN, FRED B 5000 T-REX AVE. SUITE 150 BOCA RATON, FL 33431

9.

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

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The above named entity submits this statement for the purpose of cha the obligations of registered agent.	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
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		

NAME STREET ADDRESS CITY - S1 - ZIP	ROTHMAN, FRED B 5000 T-REX AVENUE SUITE 150 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY: ST-ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	

MANAGING MEMBERS/MANAGERS

U00000139564 04/29/04-80126-008 50.00

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTA