2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000010446

CONGRESS CAPITAL, LLC

Mar 10, 2004 08:00 AM Secretary of State

FILED

Principal Place of Business

Mailing Address

159 COMMODORE DRIVE JUPITER, FL 33477

CITY-ST-ZIP

159 COMMODORE DRIVE JUPITER, FL 33477



01152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 33-0997432 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITMIRE, DRENNEN L JR ESQ 450 ROYAL PALM WAY, SIXTH FLOOR

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PALM BEACH, FL 33480		***************************************	IN THIS SPACE	
	named entity submits this statement for the purpose of chartions 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 little if applicable.		(NOTE: Registered Agent signature required when reinstading) DATE		
F	iling Fee is \$50.00 ue by May 1, 2004		880000083719 03/10/04-80050-018 50.00	
9. TITLE NAME STREET ADDRESS GITY-ST-ZIF TITLE NAME STREET ADDRESS GITY-ST-ZIF	MANAGING MEMBERS/MANAGERS MGRM BRUNO, AL 159 COMMODORE DRIVE JUPITER, FL 33477			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
BILE NAME				

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE: 4