

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010470

Entity Name: MARK 2000, L.L.C.

FILED
Jan 28, 2005
Secretary of State

Current Principal Place of Business:

8050 SW 10 STRET
#4600
PLANTATION, FL 33324

Current Mailing Address:

8050 SW 10 STRET
#4600
PLANTATION, FL 33324

New Principal Place of Business:

9130 SOUTH DADELAND BLVD
#1504
MIAMI, FL 33156

New Mailing Address:

9130 SOUTH DADELAND BLVD
#1504
MIAMI, FL 33156

FEI Number: 65-1122831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUZMAN, MARIO I
9130 S DADELAND BLVD., STE #1504
MIAMI, FL 33156 US

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: TOIBERMAN, LEONARDO GERMA
Address: 2710 OAKBROOK LN
City-St-Zip: WESTON, FL 33332

Title: MGRM () Delete
Name: TANNER, BEATRIZ S
Address: 2710 OAKBROOK LN
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TOIBERMAN, LEONARDO GERMA
Address: 5700 COLLINS AVENUE # 5J
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM (X) Change () Addition
Name: TANNER, BEATRIZ S
Address: 5700 COLLINS AVENUE # 5J
City-St-Zip: MIAMI BEACH, FL 33140

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: LEONARDO TOIBERMAN

MGRN

01/28/2005

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