

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 02, 2005
Secretary of State

DOCUMENT# L01000011831

Entity Name: BRIANA RESIDUALS, L.L.C.

Current Principal Place of Business:

RG SOLOMON ARCADE
MAIN STREET STE. 11
CHARLESTON NEVIS, WEST INDIE,

New Principal Place of Business:

RG SOLOMON ARCADE
MAIN STREET STE. 11
CHARLESTON NEVIS, WEST INDIE, XX

Current Mailing Address:

3350 BUSCHWOOD PARK DR STE. 160
TAMPA, FL 33618

New Mailing Address:

FEI Number: 01-0566720 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OFFSHORE TRUST SERVICES, INC.
3350 BUSCHWOOD PARK DRIVE STE. 160
TAMPA, FL 33618 US

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/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: FIRST FIDELITY TRUST, LTD
Address: RG SOLOMON ARCADE MAIN STREET #11
City-St-Zip: CHARLESTON NEVIS, WEST INDIE,

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

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: FIRST FIDELITY TRUST. LTD

MGR

08/02/2005

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