LIMITED LIABILITY COMPANY JNIFORM BUSINESS REPORT (UBR)

**UNIFORM BUSINESS REPORT (UI** FILED 03 DEC 26 PM 2: 55 FIRST CHOICE STRUCTULES, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE Principal Place of Business 3. Mailing Address 90 5499 N. Federal Hwy Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE K City & State City & State 4. FEI Number Applied For BOCA Laton 65-1124344 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired-7. Name and Address of Current Registered Agent Name 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 FEE IS \$50.00 Make Check Payable to Florida Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS 9. TITLE TITLE BILL Mancobsky 90 5499 N. Federal Hury, HK 400025774564 NAME NAME STREET ADDRESS STREET ADDRESS CR2E083B CITY-ST-7IP CITY-ST-ZIP BOCA RUTON FL 33487 HILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE . NAME NAME . STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STRÈET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

Daytime Phone #





Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

First Choice Structures, LLC

65-1124344

To Whom It May Concern:

I am writing in reference to the above mentioned corporation. Please be advised that we never received the first notice to file our annual report for year 2003. Accordingly, please find enclosed a completed LLC Uniform Business Report for year 2003 along with a money order for \$50.00 to cover the initial filing fee. We are respectfully requesting an abatement of any penalties that my have accrued due to this error. Please update my records and make any necessary corrections.

Thank you for your cooperation and understanding in this matter.

Sincerely,

Bill Mankofsky, Vice President