2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012484

City-St-Zip:

PEMBROKE PINES, FL 33028

FILED Apr 07, 2004 Secretary of State

Entity Name: AMDAMAR, LLC **Current Principal Place of Business: New Principal Place of Business:** 13784 NW 19TH ST. PEMBROKE PINES, FL 33028 **Current Mailing Address: New Mailing Address:** 13784 NW 19TH ST PEMBROKE PINES, FL 33028 FEI Number: 11-3703384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLATA, NESTOR I 13755 NW 18TH ST. PEMBROKE PINES, FL 33028 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: ADDITIONS/CHANGES:** MGR () Delete () Change () Addition PLATA, AMBROSIO Name: Name: Address: 13784 NW 19TH ST. Address: City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: REDONDO, MARIA Name: Address: 13784 NW 19TH ST. Address: City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PLATA, NESTOR Name: Name: 13784 NW 19TH ST. Address: Address:

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.

City-St-Zip:

SIGNATURE: NESTOR I PLATA MGRM 04/07/2004