2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 19, 2004 08:00 AM Secretary of State

	ANNUAL	REPORT		Apr 13	votomy of State
DOCUMENT # L01000012781 1. Entity Name BROMAN ENTERPRISES, L.L.C.				Sec	retary of State
Principal Place 8814 BAY Hi ORLANDO, FI	ARBOUR BLVD	Mailing Address 8814 BAY HARBOUR BLVD ORLANDO, FL 32836			· 新星(編7.3)被7/2 (7/21/1) (2/22/2/13/2/2/17/2/2/2/17/2/2/2/17/2/2/2/17/2/2/2/17/2/2/2/17/2/2/2/17/2/2/2/17/2/2/2
DO NOT WRITE IN THIS SPA			CE	03022004No Chg-LLC 4. FEI Number 04-3630648	CR2E083 (10/03) Applied For Not Applicable
				5. Certificate of Status Desired	S5.00 Additional Fee Required
6. Name and Address of Current Registered Agent JONES, HARRY A 11 A MAX BREWER PKWY TITUSVILLE, FL 32796			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement to ions of registered agent.		ed office or register	<u> </u>	rida. I am familiar with, and accept
Filing Fee is \$50.00 Due by May 1, 2004			U00000118805 04/19/04-80075-008 50.00		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	MANAGING MEMBE MGRM INOCHOVSKY, ROMAN 8814 BAY HARBOUR BLVD ORLANDO, FL 32836 MGRM BUCKLEY, BRIAN THOMAS 8815 BAY HARBOUR BLVD ORLANDO, FL 32836	RS/MANAGERS		DO NOT W IN THIS SF	
TITLE NAME STREET ADDRESS				,	

11. I hereby certify that the information supplied with this filling 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 cath; 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.

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SIGNATURE:

CITY-ST-ZIP

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

04/15/04

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