2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000012955

1. Entity Name MMS HOLDINGS, L.L.C.

Jan 30, 2004 08:00 AM Secretary of State

Principal Place of Business 1801 S FEDRAL HWY BOCA RATON, FL 33432 Mailing Address 1801 S FEDRAL HWY BOCA RATON, FL 33432

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01262004No Chg-LLC CR2E083 (10/03)

4. FEI Number Applied For 65-1127846 Not Applicable

5. Certificate of Status Desired 55.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KISSMAN, NANCY 1801 S FEDERAL HWY BOCA RATON, FL 33432

STREET ADDRESS C/TY-ST-ZIP

NAME SIRELI ADDRESS CITY-ST-ZIP

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					the same of the same and the
	e named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or r	registered agent, or both, in	the State of Florida. I am fa	miliar with, and accept
SIGNATURE.				1. H	<u></u>
Signature, typed or printed name of registered agent and title if applicable		(NOTE, Registered Agent signature required when reinstating) DATE			a a series and a
9.	MANAGING MEMBERS/MANAGERS		<u> </u>	·	
TITLE	MGR				
NAME	KISSMAN, DENNIS				
STREET ADDRESS	2000 SPANISH RIVER ROAD				
CiTy-53-782	BOCA RATON FL 33432	1		DOMESTINALL	

MGR HHEE KISSMAN, NANCY NAME 2000 SPANISH RIVER ROAD STREET ADDRESS BOCA RATON, FL 33432 City-SI-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NARKS

U00000023426 02/02/04-80025-010 50.00

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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: When The Signing Managing Member, OF AUTHORIZED REPRESENTATIVE

1/26/04

561/338-5800

Daytime Phone