2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 26, 2004 08:00 AM Secretary of State

DOCUMENT #	L0100)0013045
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1. Entity Name

KEY LARGO SERVICE CENTER, L.L.C.

Principal Place of Business

Mailing Address

7900 N.W. 36TH STREET MIAMI, FL 33166

7900 N.W. 36TH STREET MIAMI, FL 33166



04202004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1132007 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

			Current		

ALVAREZ, VICTOR R 7900 N.W. 36TH STREET MIAMI, FL 33166

CITY ST ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF S

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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_	Signature typed or printed name of registered agent and talk if applicable	(NOTE Registered	Agent signature required when reinstating)	DATE		
Fi	ling Fee is \$50.00 ue by May 1, 2004			000000128809 04/26/04-68053-608 50.00		
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CNY-ST-ZIP	MGRM ALVAREZ, VICTOR R 7900 N.W. 36TH STREET MIAM!, FL 33166	 				
NAME STREET ADDRESS CITY ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY: ST-ZIP			IN '	THIS SPACE		
NAME STREET ADDRESS CLTY: ST: ZIP						
TITLE NAME STREET ADDRESS						

11. I hereby certify that the information supplied with this filling acces 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 of trustee exposured to execute this report as required by Chapter 608, Florida Statutes.

NG MEMBER, OR AUTHORIZED REPRESENTATIVE