

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000013731

**FILED**  
**Jul 19, 2004**  
**Secretary of State**

**Entity Name:** SANIBEL DIAL-A-MASSAGE, L.L.C.

**Current Principal Place of Business:**

1501 MIDDLE GULF DR  
C-201  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 101525  
CAPE CORAL, FL 33910

**New Mailing Address:**

1205 SW 10 TERRACE  
CAPE CORAL, FL 33991

**FEI Number:** 65-1133582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KAYATTA, JULIE R  
1205 SW 10TH TERRACE  
CAPE CORAL, FL 33991

**Name and Address of New Registered Agent:**

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:**

**Title:** MGRM ( ) Delete  
**Name:** KAYATTA, JULIE R  
**Address:** 1205 SW 10TH TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33991

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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.

**SIGNATURE:** JULIE R. KAYATTA

MGR

07/19/2004

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date