

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015805

FILED
Apr 05, 2004
Secretary of State

Entity Name: VISTA INVESTMENTS ENTERPRISE, L.L.C.

Current Principal Place of Business:

6119 W. IRLO BRONSON
MEM. HWY
KISSIMMEE, FL 34747

New Principal Place of Business:

6119 W. IRLO BRONSON MEM. HWY
KISSIMMEE, FL 34747

Current Mailing Address:

6119 W. IRLO BRONSON
MEM. HWY
KISSIMMEE, FL 34747

New Mailing Address:

6119 W. IRLO BRONSON MEM. HWY
KISSIMMEE, FL 34747

FEI Number: 59-3743273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAVAID, TARIQ
8725 WITTEN WOOD COVE
ORLANDO, FL 32836 US

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: JAVAID, TARIQ
Address: 6119 W. IRLO BRONSON MEM. HWY
City-St-Zip: KISSIMMEE, FL 34747

Title: MGRM () Delete
Name: JAVAID, FAIZA
Address: 6119 W. IRLO BRONSON MEM. HWY
City-St-Zip: KISSIMMEE, FL 34747

ADDITIONS/CHANGES:

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

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: TARIQ JAVAID

MGRM

04/05/2004

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