

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016604

Entity Name: CASHMEX FLORIDA, LLC

FILED
Apr 23, 2004
Secretary of State

Current Principal Place of Business:

331 N. KROME AVENUE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

12946 SW 133 CT.
SUITE B
MIAMI, FL 33186 US

Current Mailing Address:

331 N. KROME AVENUE
HOMESTEAD, FL 33030 US

New Mailing Address:

12946 SW 133 CT.
SUITE B
MIAMI, FL 33186 US

FEI Number: 65-1144827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBRIJA, BERNARDO
331 N. KROME AVENUE
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

LEBRIJA, BERNARDO
12946 SW 133 CT.
SUITE B
MIAMI, FL 33186 US

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:

04/23/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LEBRIJA, LORENZO
Address: 331 N. KROME AVENUE
City-St-Zip: HOMESTEAD, FL 33030 US

Title: MGRM () Delete
Name: LEBRIJA, JOSE A
Address: 331 N. KROME AVENUE
City-St-Zip: HOMESTEAD, FL 33030 US

Title: MGRM () Delete
Name: LEBRIJA, JUAN C
Address: 2635 CAMINO DEL RIO SOUTH #309
City-St-Zip: SAN DIEGO, CA 92108 US

Title: MGRM (X) Delete
Name: LEBRIJA, JUAN C
Address: 331 N. KROME AVENUE
City-St-Zip: HOMESTEAD, FL 33030 US

Title: MGRM () Delete
Name: LEBRIJA, BERNARDO
Address: 331 N. KROME AVENUE
City-St-Zip: HOMESTEAD, FL 33030 US

ADDITIONS/CHANGES:

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

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

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

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: LORENZO LEBRIJA

MGRM

04/23/2004

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