2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 09, 2004 08:00 AM Secretary of State DOCUMENT #_L01000017532 1. Entity Name FINANCIAL EDUCATION SERVICES GROUP, LLC Principal Place of Business Mailing Address 5936 NW 54TH CIRCLE 5936 NW 54TH CIRCLE CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 01062004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1143380 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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 title if applicable (NOTE: Registered Agent signature required whon reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2004 9. MANAGING MEMBERS/MANAGERS TITLE MGR NAME DEROSE, RICHARD J STREET ADDRESS 5936 NW 54TH CIRCLE U00000001649 CITY-ST-ZIP CORAL SPRINGS, FL 33067 -01/12/04-80018-012 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP ппц NVME STREET ADDRESS CITY-ST-7IP me NAME STREET ADDRESS CITY-ST-ZIP 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.