

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000017729

**FILED**  
**Apr 29, 2004**  
**Secretary of State**

**Entity Name:** GABIART TECHNOLOGIES LLC

**Current Principal Place of Business:**

8300 NW 14TH ST  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

8300 NW 14TH ST  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 65-1146132

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PENIN, FABIAN ROBERTO  
6340 NW 114TH AVE #103  
MIAMI, FL 33178 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: G ( ) Delete  
Name: ROBERTO PENIN, FABIAN  
Address: 6340 NW 114TH AVE #103  
City-St-Zip: MIAMI, FL 33178

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ROBERTO PENIN, FABIAN  
Address: 6340 NW 114TH AVE #103  
City-St-Zip: MIAMI, FL 33178

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: FABIAN PENIN

MGR

04/29/2004

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