

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017877

FILED
Feb 04, 2005
Secretary of State

Entity Name: A. C. S. A. INVESTMENTS LLC.

Current Principal Place of Business:

527 N W 159 LN
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

527 NW 159TH LN
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 65-1154676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, CYNETTA
527 N.W. 159 LANE
PEMBROKE PINES, FL 33028 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: MGR () Delete
Name: WILLIAMS, CYNETTA
Address: 527 N.W. 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR () Delete
Name: WILLIAMS, ARAM P
Address: 527 N.W. 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

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: CYNETTA WILLIAMS

MGRM

02/04/2005

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