## 2004 LIMITED LIABILITY COMPANY

## **FILED**

ANNUAL REPORT		Feb 20, 2004 08:00
DOCUMENT # L01000019475  1. Entity Name RENSARK, L.L.C.		Secretary of State
Principal Place of Business Mailing Address 2428 FISHER ISLAND DR., UNIT 5208 2428 FISHER ISLAND DR., UNIT FISHER ISLAND, FL 33109 FISHER ISLAND, FL 33109	T 5208	
DO NOT WRITE IN THIS SPA	CE	02062004 No Chg-LLC CR2E083 (10/03)  4. FEI Number Applied For S7-1138271 Nut Applied be S5.00 Additional Fee Required
6. Name and Address of Current Registered Agent	-	
ROSENBERG, DONALD S ONE S.E. THIRD AVE., STE. 3050 MIAMI, FL 33131	7 - 00000	DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its register the obligations of registered agent  SIGNATURE  Signature, typed or printed name of registered agent and title # applicable  (NOTE Registere	ed office or registeri	
Filing Fee is \$50.00 Due by May 1, 2004		02/20/04-80073-004 \$5.00
9. MANAGING MEMBERS/MANAGERS  INTEL MAME STREEL ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
NAME SIFIEL ADDRESS CITY-SI-ZIP	-	IN THIS SPACE
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11. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

NAME STREET ADDRESS CMY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND REPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE