


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000020715  
 1. Entity Name  
 MAS HOLDING, LLC



Principal Place of Business      Mailing Address  
 10300 SUNSET DRIVE, SUITE 380      10300 SUNSET DRIVE, SUITE 380  
 MIAMI, FL 33173      MIAMI, FL 33173

**DO NOT WRITE IN THIS SPACE**



01292004No Chg-LLC      CR2E083 (10/03)

4. FEI Number      Applied For  
 03-0461580      Not Applicable

5. Certificate of Status Desired       \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 Ayme, Alfrredo F  
 10300 SUNSET DRIVE, SUITE 380  
 MIAMI, FL 33173

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2004**

L00000045873  
 02/11/04-80080-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	TD
NAME	AYME, ALFREDO
STREET ADDRESS	10300 SUNSET DR. STE 380
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	PD
NAME	AYME, ALFREDO
STREET ADDRESS	10300 SUNSET DR. STE 380
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

**SIGNATURE:** ALFREDO F. Ayme S.V.P.      Date 02-09-04      Daytime Phone # 305-271-3232

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