

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000020855

FILED
Apr 29, 2003
Secretary of State

Entity Name: TRAJESS ENTERPRISES, LLC

Current Principal Place of Business:

1503 VIA DELUNA
PENSACOLA BEACH, FL 32561

New Principal Place of Business:

464 JORDAN STUART CR.
224
APOPKA, FL 32703

Current Mailing Address:

1503 VIA DELUNA
PENSACOLA BCH, FL 32561

New Mailing Address:

464 JORDAN STUART CR
224
APOPKA, FL 32703

FEI Number: 59-3759992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1000 WEST AVE. SUITE 1114
MIAMI BEACH, FL 33139 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: MGRM () Delete
Name: MCLAIN, IVEY
Address: 3300 BAISDEN RD.
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM () Delete
Name: MCLAIN, TRACI
Address: 3300 BAISDEN RD.
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCLAIN, IVEY
Address: 464 JORDAN STUART CR. APT. 224
City-St-Zip: APOPKA, FL 32703

Title: MGRM (X) Change () Addition
Name: MCLAIN, TRACI
Address: 464 JORDAN STUART CR. APT 224
City-St-Zip: APOPKA, FL 32703

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: IVEY L. MCLAIN

PRES

04/29/2003

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