

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021718

FILED
Feb 01, 2004
Secretary of State

Entity Name: SUMMERJOBSONCAPECOD.COM, LLC

Current Principal Place of Business:

260 CRANDON BLVD.
SUITE 32-PMB 133
KEY BISCAYNE, FL 331491540 US

New Principal Place of Business:

Current Mailing Address:

260 CRANDON BLVD.
SUITE 32-PMB 133
KEY BISCAYNE, FL 331491540 US

New Mailing Address:

FEI Number: 30-0038360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPELAND, INSLEE L
260 CRANDON BLVD.
SUITE 32-PMB 133
KEY BISCAYNE, FL 331491540 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: COPELAND, INSLEE L PRES
Address: 260 CRANDON BLVD., SUITE 32-PMB 133
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGR () Delete
Name: COPELAND, SCOTT D VP
Address: 260 CRANDON BLVD., SUITE 32-PMB 133
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: INSLEE L. COPELAND

PRES

02/01/2004

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