

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90364 031 ****50.00

DOCUMENT # L01000021917 1. Entity Name LYNSAB ENTERPRISES, L.L.C.					
Principal Place of Business 7280 WEST PALMETTO PARK RD., 306N BOCA RATON, FL 33433 US			Mailing Address 7280 WEST PALMETTO PARK RD., 306N BOCA RATON, FL 33433 US		
2. Principal Place of Business 290 S.W. 12 Avenue Suite, Apt. #, etc.		3. Mailing Address 290 S.W. 12 Avenue Suite, Apt. #, etc.			
City & State Deerfield Beach, FL		City & State Deerfield Beach, FL		4. FEI Number 65-1159861	
Zip 33442		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BEAVER PROPERTIES INC 7280 WEST PALMETTO PARK RD 306N BOCA RATON, FL 33433			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 290 S.W. 12 Avenue City Deerfield Beach FL Zip Code 33442		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SABGA, LYNDIA <input type="checkbox"/> Delete 7280 WEST PALMETTO PARK RD., STE. 306 N BOCA RATON, FL 33433		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 290 S.W. 12 Avenue Deerfield Beach, FL 33442	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SABGA, JOSEPH <input type="checkbox"/> Delete 7280 WEST PALMETTO PARK RD .STE 306N BOCA RATON, FL 33433		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 290 S.W. 12 Avenue Deerfield Beach, FL 33442	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			Joseph Sabga		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 04/29/2005		
			Daytime Phone # (954) 425-0295		