


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90144 003 ****50.00

DOCUMENT # L02000002170 1. Entity Name JAZZ CENTRAL LLC																											
Principal Place of Business 801 BRICKELL KEY BLVD., STE 3104 MIAMI, FL 33131 US		Mailing Address 801 BRICKELL KEY BLVD., STE 3104 MIAMI, FL 33131 US																									
2. Principal Place of Business 8826 WEST FLAGLER ST. Suite, Apt. #, etc. # 112 City & State MIAMI, FL Zip 33174 Country U.S.A.		3. Mailing Address 8826 WEST FLAGLER ST. Suite, Apt. #, etc. # 112 City & State MIAMI, FL Zip 33174 Country U.S.A.																									
4. FEI Number 41-2030078		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent OLECH, DANIEL 801 BRICKELL KEY BLVD., STE 3104 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name DANIEL OLECH Street Address (P.O. Box Number is Not Acceptable) 8826 WEST FLAGLER ST. #112 City MIAMI State FL Zip Code 33174																									
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 <i>Daniel Olech</i> DANIEL OLECH DATE 04/26/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to: Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:40%;">NAME</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>OLECH, DANIEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>801 BRICKELL KEY BLVD., STE 3104</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33131</td> <td></td> </tr> </table>		TITLE	NAME	<input type="checkbox"/> Delete	NAME	OLECH, DANIEL		STREET ADDRESS	801 BRICKELL KEY BLVD., STE 3104		CITY-ST-ZIP	MIAMI, FL 33131		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:40%;">NAME</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>DANIEL OLECH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8826 WEST FLAGLER ST. #112</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33174</td> <td></td> </tr> </table>		TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	DANIEL OLECH		STREET ADDRESS	8826 WEST FLAGLER ST. #112		CITY-ST-ZIP	MIAMI, FL 33174	
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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: <i>Daniel Olech</i> DANIEL OLECH		DATE: 04/26/04 DAYTIME PHONE: 305-713-7380																									