## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

## FILED Apr 19, 2005 08:00 AM Secretary of State **DOCUMENT # L02000003115** 1. Entity Name BIANCO, LLC Principal Place of Business Mailing Address 231 LAGOON AVE. NAPLES, FL 34108 C/O KENNETH P BIANCO 2969 CHARLOTTE DR MERRICK, NY 11566 04132005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 01-0610513 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FELDEN, CHRISTIAN B ESQ. DO NOT WRITE 3838 TAMIAMI TRAIL N., STE. 416 NAPLES, FL 34103 IN THIS SPACE 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. 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, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE BIANCO, KENNETH NAME STREET ADDRESS 2969 CHARLOTTE DR CITY-ST-ZIP MERRICK, NY 11566 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP mue NAME STREET ADDRESS CITY-ST-709 I hereby certify that the information supplied with this tiling does not quality 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.

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE