

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003780

FILED
Jun 11, 2004
Secretary of State

Entity Name: THE FADE CENTER, LLC

Current Principal Place of Business:

19509 NW 57 AVENUE
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

19509 NW 57 AVENUE
MIAMI, FL 33055

New Mailing Address:

FEI Number: 02-0687056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALCE, HAROLD
18842 NW 65 COURT
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

LIRANZO, ENILDA
19509 NW 57 AVENUE
MIAMI, FL 33055 US

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: ENILDA CAROLINA LIRANZO

06/11/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SALCE, HAROLD
Address: 18842 NW 65 COURT
City-St-Zip: MIAMI, FL 33015

Title: MGRM (X) Delete
Name: SALCE, E. CAROLINA
Address: 18842 NW 65 COURT
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LIRANZO, ENILDA C
Address: 19509 NW 57 AVENUE
City-St-Zip: MIAMI, FL 33055

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: ENILDA CAROLINA LIRANZO

MGR

06/11/2004

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