2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003871

Entity Name: SCRM LLC

Address:

City-St-Zip:

5429 NW 106 DR

CORAL SPRINGS, FL 33076

FILED Mar 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9461 HOLLYHOCK CT DAVIE, FL 33328 **Current Mailing Address: New Mailing Address:** 9461 HOLLYHOCK CT DAVIE, FL 33328 FEI Number: 04-3610025 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ABOLAFIA, SCOTT E 9461 HOLLYHOCK CT DAVIE, FL 33328 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: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete ABOLAFIA, SCOTT E Name: Name: 9461 HOLLYHOCK CT Address: Address: City-St-Zip: DAVIE, FL 33328 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PAGANO, RAYMOND JR Name: Address: 10162 NW 69 MANOR Address: City-St-Zip: PARKLAND, FL 33076 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition MERKT, MICHAEL Name: Name: 16013 EMERALD COVE RD Address: Address: City-St-Zip: WESTON, FL 33331 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: DELLAIRA, CHARLES Name:

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.

Address:

City-St-Zip:

SIGNATURE: SCOTT E ABOLAFIA MGR 03/24/2004