2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

May 22, 2003 8:00 am Secretary of State 04-18-2003 90079 044 ****50.00

1. Entity Nar	De TAILLIAI	# LUZUUU	JU439 1		A STATE						
BANDIT A			•								
Principal Place of Business			Mailing Address	Mailing Address			44002101				
5635 MCDONALD AVENUE KEY WEST FL 33040			5635 MCDONALD AVENUE KEY WEST FL 33040								
- 61									11 J. 5 J.		
2. Principal Place of Business			3. Mailing Address					/161 6.0 61/1 6.0 76/1 6.0 16/1			
Suite, Apt, #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. FE	4. FEI Number 3639566 Applied For Not Applicable				
Zip	Zip Country		Zip	Country			ertificate of Status De	_	\$5.00 Ad Fee Require	ditional	
6. Name and Address of Current			t Registered Agent	tegistered Agent			7. Name and Address of New Registered Agent				1
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SO40 LAUREL AVENUE 5565 Second AVENUE 400 Second					Street Add	Street Address (P.O. Box Number is Not Acceptable)					
RET WEST PL 33940					:						
					City		FL Zip Code				
the obligat	named entitions of regist	y submits this statement to ered agent.	or the purpose of changing	g its register	ed office or re	gistered ager	nt, or both, in the State	of Florida. Lar	n familiar with,	and accept	
SIGNATURE	Sighardio, typed	or printed name of registrated ager	nt and title if applicable.	(NOTE: Registere	d Agent signature r	required when reins		DATE			ļ
		0	Make Check Pay	-	•		tate				
9.		MANAGING MEMB	ERS/MANAGERS	10.			ADDIT	IONS/CHANGE	S		١
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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: Daytime Phone #