2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State
04-05-2004 90495 018 ****50.00

DOCUMENT # L02000005297

1. Entity Name
PROGRESS 2002, LLC

34006537

01092004 Chg-LLC CR2E083 (10/03)

Principal Place of Business	Mailing Address
7000 WEST PALMETTO PARK RD., STE. 400 BOCA RATON, FL 33433	7000 WEST PALMETTO PARK RD., STE. 400 BOCA RATON, FL 33433

2. Principal Place of Business	3. Mailing Address
6601 LYONS Road	6601 LYONS ROAD
Suite, Apt. #, etc. H-5	Suite, Apt. #, etc. H-5
City & State Coconut Creek, FL	City & State COCONUT CREEK, FL
Zip 33073 Country USA	Zip 33073 Country USA

4. FEI Number 03-0415891 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RITTER, GREGORY J ESQ. RITTER CHUSID BIVONA & COHEN, LLP 7000 W. PALMETTO PARK RD., STE. 400 BOCA RATON, FL 33433	Name BEN GAL Street Address (P.O. Box Number is Not Acceptable) 6601 LYONS ROAD H-5 City COCONUT CREEK FL Zip Code 33073

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 _____ 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, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ~~IOSEF, REN~~ ~~7000 W PALMETTO PARK RD~~ ~~BOCA RATON, FL 33433~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRINCIPAL RON I. SHARONI 6601 LYONS ROAD COCONUT CREEK FL 33073	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER BEN GAL 6601 LYONS ROAD H-5 COCONUT CREEK, FL 33073	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRINCIPAL RON LIVINI 6601 LYONS ROAD H-5 COCONUT CREEK, FL 33073	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: BEN GAL 3/30/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #