

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000005784

**FILED**  
**Jan 29, 2004**  
**Secretary of State**

**Entity Name:** LASER SMOOTH OF SOUTH FLORIDA, L.L.C.

**Current Principal Place of Business:**

1815 E. COMMERCE BLVD.  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

1815 E. COMMERCE BLVD.  
201  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

1815 E. COMMERCE BLVD.  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

1815 E. COMMERCE BLVD.  
201  
FORT LAUDERDALE, FL 33308

**FEI Number:** 01-0625694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MADAR, DEAN  
1815 E. COMMERCIAL BLVD., SUITE 301  
FORT LAUDERDALE, FL 33308

**Name and Address of New Registered Agent:**

MADAR, DEAN  
1815 E. COMMERCIAL BLVD.  
SUITE 201  
FORT LAUDERDALE, FL 33308

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:

01/29/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MADAR, DEAN  
Address: 1815 E. COMMERCIAL BLVD., SUITE 201  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MADAR, DEAN  
Address: 1815 E. COMMERCIAL BLVD., SUITE 201  
City-St-Zip: FORT LAUDERDALE, FL 33308

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: DEAN MADAR

MGRM

01/29/2004

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