

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007547

FILED
May 03, 2004
Secretary of State

Entity Name: BLUEKAP CONSULTING, LLC

Current Principal Place of Business:

17387 SOUTHWEST 36TH STREET
MIRAMAR, FL 33029 US

New Principal Place of Business:

3600 S. STATE ROAD 7
SUITE 356
MIRAMAR, FL 33023 US

Current Mailing Address:

PO BOX 826681
SOUTH FLORIDA, FL 33082 US

New Mailing Address:

PO BOX 297662
PEMBROKE PINES, FL 33029 US

FEI Number: 02-0568033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW SOLUTIONS GROUP, LLC
431 NE 210TH TERRACE, SUITE 203-24
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: CUFFY, LILLIA
Address: 17387 SOUTHWEST 36TH STREET
City-St-Zip: MIRAMAR, FL 33029 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CUFFY, LILLIA
Address: 5326 SW 126TH AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

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: LILLIA CUFFY

MGR

05/03/2004

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