2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2004 08:00 AM Secretary of State

DOCUMENT	# L02000008514
1 Colin Name	

Entity Name

SCHWEKY INVESTMENTS, L.C.

Principal Place of Business 19355 TURNBERRY WAY SUITE 2-F

AVENTURA, FL 33140

Mailing Address

930 MAGNOLIA AVE. ELIZABETH, NJ 07201

US



DO NOT WRITE IN THIS SPACE

03262004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 01-0724787

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

AMSALEM, FRANK 777 ARTHUR GODFREY ROAD SECOND FLOOR MIAMI BEACH, FL 33140

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered of	fice or registered agent, or bo	th, in the State of Florida. I am familia	r with, and accept
SIGNATURE_			g and a second		<u> </u>
	Signature, typed or printed name of registered agent and little if applicable.	(NOTE, Registered Ager	nt signature required when reinstating)	DATE	i
Fi D	iling Fee is \$50.00 ue by May 1, 2004				e . =
9,	MANAGING MEMBERS/MANAGERS	<u> </u>	***************************************		
TITLE	MRGM				
NAME	SCHWEKY, ISAAC B				
STREET ADDRESS	930 MAGNOLIA AVE.	1		-	
CITY-ST-ZIP	ELIZABETH, NJ 07201		j		
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NAME	SCHWEKY, ISAAC E	i		U 00 000132011	•
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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: SIGNATURE AND TYPED OR WHITED NAME OF

CITY-ST-ZIP

FITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

HINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

31/2004

Daytima Phone #