


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000009096  
 1. Entity Name  
 MIAMIPARTIES.COM, LLC



Principal Place of Business      Mailing Address  
 6920 S.W. 44TH ST., #108      6920 S.W. 44TH ST., #108  
 MIAMI, FL 33155      MIAMI, FL 33155



03172004 No Chg-LLC      CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 02-0655306      Not Applicable

5. Certificate of Status Desired       \$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

**DO NOT WRITE IN THIS SPACE**

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**

U00000117516  
 '04/19/04-80022-020 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE: MGRM  
 NAME: SWINGER, JESSE V  
 STREET ADDRESS: 6920 S.W. 44TH ST., #108  
 CITY-ST-ZIP: MIAMI, FL 33155

TITLE: MGRM  
 NAME: MILLER, ANTHONY  
 STREET ADDRESS: 3500 SUTTON RD.  
 CITY-ST-ZIP: HOLLYWOOD, FL 33023

TITLE: MGRM  
 NAME: HALL, SAMUEL A  
 STREET ADDRESS: 135 WASHINGTON ST  
 CITY-ST-ZIP: ST AUGUSTINE, FL 32804

TITLE: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_  
 CITY-ST-ZIP: \_\_\_\_\_

TITLE: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_  
 CITY-ST-ZIP: \_\_\_\_\_

TITLE: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_  
 CITY-ST-ZIP: \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE**

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: *Jesse V Swinger*      4/19/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #