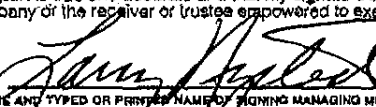


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED**
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000010257		
1. Entity Name NYSTEDT ENTERPRISES, LLC		
Principal Place of Business 8450 U.S. 301 SOUTH RIVERVIEW, FL 33569		Mailing Address 114 W. BLOOMINGDALE AVE BRANDON, FL 33511
DO NOT WRITE IN THIS SPACE		
		01192005No Chg-LLC CR2E083 (10/03)
4. FEI Number 81-0552721		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent HINES, JAMES P 315 S. HYDE PARK AVE. TAMPA, FL 33606		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 _____ Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR NYSTEDT, LARRY W 114 W. BLOOMINGDALE AVENUE BRANDON, FL 33511	
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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 638, Florida Statutes.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date 1/19/05 813 6955456 Daytime Phone #