

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011204

FILED
Jul 09, 2004
Secretary of State

Entity Name: QTEE, LLC

Current Principal Place of Business:

1390 SOUTH DIXIE HWY #1104
CORAL GABLES, FL 33146

New Principal Place of Business:

5200 BLUE LAGOON DRIVE
SUITE 100
MIAMI, FL 33126

Current Mailing Address:

1390 SOUTH DIXIE HWY #1104
CORAL GABLES, FL 33146

New Mailing Address:

5200 BLUE LAGOON DRIVE
SUITE 100
MIAMI, FL 33126

FEI Number: 61-1413897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A CORPORATE SERVICES, INC.
92 SADBERRY ROAD
QUINCY, FL 323510000 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: WHEELER, TODD
Address: 1049 MALAGA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: WHEELER, CLAUDINE
Address: 1049 MALAGA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: CLAUS, TERRY
Address: 7100 SW 133RD ST
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: CLAUS, JANENE
Address: 7100 SW 133RD ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CLAUDINE WHEELER

MGRM

07/09/2004

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