

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012055

FILED
Jan 22, 2004
Secretary of State

Entity Name: LAURUS PARTNERS, LLC

Current Principal Place of Business:

385 PACIFIC ROAD
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

385 PACIFIC ROAD
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: 02-0606940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORGANOVO, MAURICIO
385 PACIFIC ROAD
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

BORGANOVO, MAURICIO
385 PACIFIC ROAD
KEY BISCAYNE, FL 33149 US

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: MAURICIO BORGONOVO 01/22/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BORGONOVO, MAURICIO R
Address: 385 PACIFIC RD.
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM () Delete
Name: URDANETA, NELSON J
Address: 1865 BRICKELL AVE., #2009
City-St-Zip: MIAMI, FL 33129

Title: MGRM () Delete
Name: REYNAL, ALEJANDRO
Address: 1302 ASHFORD AVE, #2502
City-St-Zip: SAN JUAN, PR 00907

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:

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: MAURICIO BORGONOVO MRGM 01/22/2004

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