## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

## FILED Jun 04, 2004 08:00 AM Secretary of State

AND THE PORT			Secretary of State	
1. Entity Nam	MENT # L02000012492		Seci	ctary or State
Principal Place	e of Business Mailing Address			
PO BOX 248				
KEY WEST, F	L 33045 KEY WEST, FL 33045 US			
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		03042004 No Chg-LLC	CR2E083 (10/03)	
oř D	O NOT WRITE IN THIS SPA	CE	4, FEI Number	Applied For
			03-0447764	Not Applicable
•			5. Certificate of Status Desired	\$5.00 Additional
<u> </u>	6. Name and Address of Current Registered Agent	1		Fee Required
	o, hame and Addiese of Cuttern registered Agent	- Company of the Comp	or appears in section to approach in this is discussioned in making it is a sufficient to the section.	i das una secunitariam ateriality (darinality) quint 1224 124 Prism
	TEIN, RICHARD E M.D.		DO NOT WR	ITE
20819 6TH AVE W CUDJOE KEY, FL 33042-4009		1	and the contract of the contra	. Garandar and the second of
CODSOE	E1, FL 33042-4003		IN THIS SPA	CE
			•	
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 little if applicable (NOTE; Register	ed Agent signature required	d when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004  06/04/04-80001-019 50.00				
			<u> </u>	UUL-UU9 5U.UU
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME	MGRM BROWNSTEIN, RICHARD E M.D.	1 n n-1 -		
STREET ADDRESS	PO BOX 2480	*** j. 343 *		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filling does not qualify for the ex	2,000,000,000,000		