

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013259

FILED
Apr 30, 2004
Secretary of State

Entity Name: SKIES INTERNATIONAL, L.L.C.

Current Principal Place of Business:

15801 NW 15TH AVENUE
MIAMI, FL 33169

New Principal Place of Business:

2875 NE 191 STREET
SUITE 800
MIAMI, FL 33180

Current Mailing Address:

15801 NW 15TH AVENUE
MIAMI, FL 33169

New Mailing Address:

2875 NE 191 STREET
SUITE 800
MIAMI, FL 33180

FEI Number: 68-0508581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVE., SUITE 125
MIAMI, FL 33146 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: GILINSKI, ABRAHAM
Address: 228 PARK DRIVE
City-St-Zip: BAL HARBOUR, FL 33154

Title: MGRM () Delete
Name: GILINSKI, MOISES
Address: 287 BAL CROSS DRIVE
City-St-Zip: BAL HAROUR, FL 33154

Title: MGRM () Delete
Name: IASLOVITS, MICHAEL
Address: 168 CAMDEN DR
City-St-Zip: BAL HARBOUR, FL 33154

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: ABRAHAM GILINSKI

MBR

04/30/2004

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