## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014812

Entity Name: FIRST VENTURE LLC

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18160 COLLINS AVE, #2 1430 COMMODORE WAY SUNNY ISLES, FL 33160 HOLLYWOOD, FL 33019

Current Mailing Address: New Mailing Address:

18160 COLLINS AVE, #2 1430 COMMODORE WAY SUNNY ISLES, FL 33160 HOLLYWOOD, FL 33019

FEI Number: 02-0637790 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOYKHMAN, EDWARD

1081 HARBOR COURT

HOLLYWOOD, FL 33019 US

KUZUBOVA, GALINA

1430 COMMODORE WAY

HOLLYWOOD, FL 33019 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: GALINA KUZUBOVA 04/22/2004

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete Name: KUZUBOVA, GALINA

Address: LESNAYA STREET 14B,NEMCHINOVO ODINTSOVO

City-St-Zip: MOSCOW REGION 124025 RUSSIAN, OC

Title: ( ) Delete

Name: Address: City-St-Zip:

## **ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition

Name: KUZUBOVA, GALINA
Address: 1430 COMMODORE WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR ( ) Change (X) Addition

Name: KUZUBOV, VASILY
Address: 1430 COMMODORE WAY
City-St-Zip: HOLLYWOOD, FL 33019

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: VASILY KUZUBOV MGR 04/22/2004