2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 19, 2004 08:00 AM Secretary of State

305-6885865 Dayling Phone #

ANNUAL REPORT						Canada to Cul.	
DOCUMENT # L02000016160 1. Entity Name PAPERWHITE INVESTMENTS, LLC						Sec	cretary of State
Principal Place 4143 NW 13 MIAMI, FL 33	2 ST		Mailing Address 4143 NW 132 ST MIAMI, FL 33054	US	-		
D			IN THIS	SPA	CE	02052004 No Chg-LLC 4. FEI Number 68-0513183 5. Certificate of Status Desired	CR2E083 (10/03) Applied For Not Applicable \$5.00 Additional Fee Required
	6. Name and Add	iress of Current R	egistered Agent		, ; ··· ·		∠ A = di s ensesea
LEVY, STEVE Z 2525 N STATE RD. 7						DO NOT WI	RITE
115 HOLLYWOOD, FL 33021						IN THIS SP	ACE
HOLLIVOOD, FL 33021							
			the purpose of changin	g its register	ed office or register	red agent, or both, in the State of Flori	da. I am familiar with, and accept
-	ions of registered age					-, ,, , , , -	
SIGNATURE Signature, typed or printed name of registered against and title if epplicable. (NOTE: Registered Agent signature required when reinstating) DATE							
Filing Fee is \$50.00 Due by May 1, 2004					U00000057787 02/20/04-80003-016 50.00		
9.		NAGING MEMBER	S/MANAGERS		I		
title Name	MGRM OVED, JACK						
STREET ADDRESS	4143 NW 132 ST						
CITY-ST-ZIP	MIAMI, FL 33054	<u> </u>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							
NAME Street Address						DO NOT W	DITE
CITY-ST-ZIP				<u> = </u>		DO NOT W	
TITLE NAME						IN THIS SP	ACE
STREET ADDRESS					1		
CITY-ST-ZIP			<u>,</u>	t-	4		
TITLE NAME]		
STREET ADDRESS CITY-ST-ZIP							
TITLE	<u> </u>	<u> </u>	_ 		1		
NAME							
STREET ADDRESS							

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member of manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

URE: 5 45 CV SIGNATURE AND TYPES OF PENTIED NAME OF SIGNING MANAGING MEMBER, OH AUTHORIZED REPRESENTATIVE