

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000016275					
1. Entity Name WELP DALLAS, L.C.					
Principal Place of Business C/O ESTEIN & ASSOCIATES USA, LTD. 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819			Mailing Address C/O ESTEIN & ASSOCIATES USA, LTD. 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02172005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 04-3704160				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$5.00 Additional Fee Required	
5. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
VEGOSEN, DEAN C/O BOOSE CASEY CIKLIN LUBITZ MARTENS 515 NORTH FLAGLER DRIVE, 18TH FLOOR WEST PALM BEACH, FL 33401			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ESTEIN'S, LOTHAR C/O 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 indicated 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 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: _____		Lothar Estein		2/18/2005 (407) 354-3307	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	