2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L02000017752

Entity Name: SUCCESS DIRECT INTERNATIONAL, LLC

Current Principal Place of Business:

4800 NORTH FEDERAL HIGHWAY STE. 101D
204D
BOCA RATON, FL 33431

New Principal Place of Business:

4800 NORTH FEDERAL HIGHWAY STE.
204D
BOCA RATON, FL 33431

Current Mailing Address:

4800 NORTH FEDERAL HIGHWAY STE. 101D
BOCA RATON, FL 33431

New Mailing Address:

4800 NORTH FEDERAL HIGHWAY
204D
BOCA RATON, FL 33431

FEI Number: 51-0423750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

H.A. INCORPORATED
308 NW 101 TERRACE
CORAL SPRINGS, FL 33071 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: PSTD ( ) Delete
Name: ISAACS, SIMEON E
Address: 4800 . FEDERAL HWY STE 204-D
City-St-Zip: BOCA RATON, FL 33431

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ISAACS, SIMEON E
Address: 4800 FEDERAL HWY STE 204-D
City-St-Zip: BOCA RATON, FL 33431

Title: MGR ( ) Change (X) Addition
Name: HOFFMAN, STEVEN H
Address: 4800 FEDERAL HWY STE 204-D
City-St-Zip: BOCA RATON, FL 33431

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: STEVEN HOFFMAN MGR 04/30/2004

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