## ~2005 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** May 03, 2005 08:00 AM Secretary of State **DOCUMENT # L02000018274** 1. Entity Name 1350 TENNESSEE, LLC Principal Place of Business Mailing Address 1601 BELVEDERE RD., SUITE 407 SOUTH 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 04212005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2307305 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAPES, PAUL DO NOT WRITE 1601 BELVEDERE RD., SUITE 407 SOUTH WEST PALM BEACH, FL 33406 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if epolicable (NOTE. Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE METZ, JOHN NAME STREET ADDRESS 1601 BELVEDERE RD., SUITE 407 SOUTH li00000359071 05/04/05-80140-004 50.00 CITY-ST-ZIP WEST PALM BEACH, FL 33406 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> HARTSTEIN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE