

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018711

FILED
Apr 29, 2004
Secretary of State

Entity Name: MOBILITY UNLIMITED I, LLC

Current Principal Place of Business:

4984 WEST ATLANTIC BLVD.
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

4984 WEST ATLANTIC BLVD.
MARGATE, FL 33063

New Mailing Address:

FEI Number: 11-3643813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOMAR ACCOUNTING, P.A.
5190 NW 167TH STREET
#113
MIAMI, FL 33014 US

Name and Address of New Registered Agent:

SHOMAR ACCOUNTING, P.A.
7777 NW 146 ST
MIAMI LAKES, FL 33016 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: _____

Electronic Signature of Registered Agent

04/29/2004

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SAADE, JEAN-PIERRE
Address: 4984 WEST ATLANTIC BLVD.
City-St-Zip: MARGATE, FL 33063

Title: MGR () Delete
Name: SAADE, WILLIAM
Address: 4984 WEST ATLANTIC BLVD.
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM SAADE

MGR

04/29/2004

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