

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000019087		
1. Entity Name BONBOOP ART, LLC		
Principal Place of Business 5298 FOUNTAINS DRIVE SOUTH LAKE WORTH, FL 33467		Mailing Address 5298 FOUNTAINS DRIVE SOUTH LAKE WORTH, FL 33467
DO NOT WRITE IN THIS SPACE		
		
01062004 No Chg-LLC CR2E083 (10/03)		
4. FEI Number 52-2382578		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent MEROLA, JAMES R 11380 PROSPERITY FARMS ROAD, SUITE 204 PALM BEACH GARDENS, FL 33410		DO NOT WRITE IN THIS SPACE
5. 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. SAME SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2004		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BONNIE RAE CHAUVIN 5298 FOUNTAINS DRIVE SOUTH LAKE WORTH, FL 33467	
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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)(b), 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: <u>Bonnie Rae Chauvin</u> 1-9-04 561-687-3600 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		