

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020187

FILED  
May 13, 2004  
Secretary of State

Entity Name: F & N INVESTMENT, L.L.C.

## Current Principal Place of Business:

260 CRANDON BLVD  
STE 32 PMB 124  
KEY BISCAYNE, FL 33149

## Current Mailing Address:

260 CRANDON BLVD  
STE 32 PMB 124  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

104 CRANDON BLVD.  
SUITE # 414  
KEY BISCAYNE, FL 33149 US

## New Mailing Address:

P.O. BOX 49-1527  
KEY BISCAYNE, FL 33149 US

FEI Number: 56-2288677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, NORMAN T  
50 WEST MASHA DRIVE STE. 4  
KEY BISCAYNE, FL 33149 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: MGR ( ) Delete  
Name: HALEY AINVESTMENTS,  
Address: 260 CRANDON BLVD STE 32-PMB 124  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM ( ) Delete  
Name: CARRIBEAN ASSURANCE,  
Address: 2001 SW 97TH AVE  
City-St-Zip: MIAMI, FL 33173

Title: MGRM ( ) Delete  
Name: KARDONSKI, ANNE L  
Address: 260 CRANDON BLVD STE 32-PMB 124  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES:

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

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: ANNE L. KARDONSKI

MGRM

05/13/2004

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