## .- 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Signature, typed or printed name of registered agent and little if applicable.

**FILED** Jan 10, 2005 08:00 AM of State

> Applied For Not Applicable

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DOCUMENT # L020000 1. Entity Name AUSSIE TRADING, LLC	21673		Secret	ary	of Sta
Principal Place of Business	Mailing Address				'
1216 NE 93RD STREET MIAMI SHORES, FL 33138	1216 NE 93RD STREET MIAMI SHORES, FL 33138				
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		<u> </u>			
DO NOT WRITE IN THIS SPACE			01052005 No Chg-LLC CR2	E083 (10	03)
DO NOT WHI	IE IN THIS SPA	CE	4. FEI Number 47-0887158		Applied I Not Appl
			5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired
6. Name and Address of Cu	rrent Registered Agent				
SIMONS, BARRY L ESQUIRE 9700 S. DIXIE HIGHWAY SUITE 1030 MIAMI, FL 33156			DO NOT WRIT		

		**	
_	- 10-2		
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.

(NOTE, Registered Agent signature required when reinstating)

Fi Di	ling Fee is \$50.00 ue by May 1, 2005		**
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGRM GUSTINGER, KURT 1216 NE 93RD STREET MIAMI SHORES, FL 33138		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		V00000175508 01/10/05-80052-020 \$	55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE MAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filling 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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE .Daylime Phone

DATE