


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 26, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000022671		
1. Entity Name ADSHACK, LLC		
Principal Place of Business 6971 N. FEDERAL HIGHWAY SUITE 301 BOCA RATON FL 33487		Mailing Address 6971 N. FEDERAL HIGHWAY SUITE 301 BOCA RATON FL 33487
2. Principal Place of Business		3. Mailing Address
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip Country



MOORE CR2E083 (11/03)

4. FEI Number 68-0521753				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			7. Name and Address of New Registered Agent	
MOLL, DOUGLAS R 6971 N. FEDERAL HIGHWAY SUITE 301 BOCA RATON FL 33487			Name	
			Street Address (P.O. Box Number is Not Acceptable)	
			City FL Zip Code	

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) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME	MGR MOLL, DOUGLAS R 6971 N. FEDERAL HIGHWAY BOCA RATON FL 33487 <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	U00000067575 02/27/04-80004-015 50.00
TITLE NAME	MGR NGUYEN, TUSAN T <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY - ST - ZIP	6971 N. FEDERAL HIGHWAY BOCA RATON FL 33487	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	MGR COHEN-MOLL, DEBBIE L <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY - ST - ZIP	6971 N. FEDERAL HIGHWAY BOCA RATON FL 33487	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	MGR HEFLIN, SHERRI S <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY - ST - ZIP	6971 N. FEDERAL HIGHWAY BOCA RATON FL 33487	STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	

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 808, Florida Statutes.

SIGNATURE: *Debbie L. Cohen-Moll* *Debbie L. Cohen-Moll* *2/24/04* *561-862-0815*