

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 18, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000022964	
1. Entity Name TRIM SOLUTIONS ENTERPRISES, LLC	

Principal Place of Business 345 WEST 74TH PLACE MIAMI, FL 33014	Mailing Address 345 WEST 74TH PLACE MIAMI, FL 33014
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CANTOR, JERALD C ESQ. C/O PHILIPS, EISINGER, ET AL 4000 HOLLYWOOD BLVD., SUITE 265S HOLLYWOOD, FL 33021	DO NOT WRITE IN THIS SPACE
7. 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relocating)		DATE _____
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Filing Fee is \$50.00 Due by September 8, 2004	
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZAMBITO, STEVEN 345 W 74TH PL MIAMI, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENSTEIN, STUART 345 W 74TH PL MIAMI, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MENDOZA, BRUNO 345 W 74TH PL MIAMI, FL 33014
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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08/18/04-80002-018 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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 606, Florida Statutes.

SIGNATURE: 	8-10-04	305 8203282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #