


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L02000023105	
1. Entity Name SOURCE PRO U.S. LLC	

Principal Place of Business 311 N.E. 14TH AVENUE FORT LAUDERDALE, FL 33301	Mailing Address 311 N.E. 14TH AVENUE FORT LAUDERDALE, FL 33301
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04222004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3659301	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent DREGELY, QUETA 311 N.E. 14TH AVENUE FORT LAUDERDALE, FL 33301

**DO NOT WRITE
IN THIS SPACE**

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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____


**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRP STEWART, WILLIAM D 102 MAIME LANE JAMESTOWN, NC 27282
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRV PAULSON, MATTHEW R 3116 PEACHTREE CIRCLE DAVIE, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRS DREGELY, QUETA 311 N.E. 14TH AVENUE FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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04/26/04-80114-007 50.00

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IN THIS SPACE**

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE  **VP/SECY** **04/22/04 954 760 9748**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #