2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2004
Secretary of State

DOCUMENT# L02000024683

Entity Name: PREPPIES V, LLC

Current Principal Place of Business:

518 NORTH RIVERPOINT DRIVE
STUART, FL 34994 US

New Principal Place of Business:

2805 SO KANNER HWY
STUART, FL 34994 US

Current Mailing Address:

518 NORTH RIVERPOINT DRIVE
STUART, FL 34994 US

New Mailing Address:

6466 NW 5TH WAY
C/O PASSARIELLO & STAIANO CPA PA
FT LAUDERDALE, FL 33309 US

FEI Number: 06-2620031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATRICIA LEBOW, P.A.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: MGRM ( ) Delete
Name: LEVIN, EILEEN G MD
Address: 518 NORTH RIVERPOINT DRIVE
City-St-Zip: STUART, FL 34994 US

ADDITIONS/CHANGES:

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: EILEEN G LEVIN MD MGRM 02/13/2004

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