2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 14, 2004 8:00 am Secretary of State 04-14-2004 90283 043 ****50.00

1. Entity Name	MENT # L020000286 PRTEZ, L.L.C.	562				0111	-2004 302	65 ° 15	30.00	
Principal Place 300 BAYDR BRADENION	VESOUTH	Mailing Address POBOX435 CORTEZ, FL 34215	•				24	04130	8	
2. Principal P 4504 Suite, Apt.	lace of Business 124 TH STREET WEST #, etc.	3. Mailing Address 75-77 D.Y. ISLA Suite, Apt. #, etc.	ND BLV		42004	Chg-LLC	CR2E	E083 (10/03)		
City & State		City & State BRADENTO	N, FL	4. FI	El Number 2-3889	501		<u> </u>	plied For t Applicable	
Zip 34215	Country	Zip 34210	Country USA	5. C	ertificate o	f Status Desire		\$5.00 Add Fee Required	itional	
15 4.	6. Name and Address of Current F	registered Agent		7. N	ame and A	ddress of Ne	w Registered	d Agent	-	
NAVLODI	DENELODE		Name NA	YLOR	Pe	NELO	PE			
	PENELOPE PRIVE SOUTH		Street A	Street Address (P.O. Bóx Number is Not Acceptable) 7.5 TIDY ISLAND BLVD						
	ON, FL 34217		7.5	TIDY	131	<u>. HN D</u>	BLVD			
			City	4 D/=7J tz	· · · · ·		F	Zip Code	210	
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or	registered age	ent, or both	, in the State o				
8. The above named enalty 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										
	San alure, types or painted that is or test select again a	TOTAL OF APPRICADIO.	Oglatorou Hgorii aigrica	are required when the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-		
Filing Fee is \$50.00 Due by May 1, 2004					ŀ		Make check	neveble to		
Di	ue by May 1, 2004							ment of State	,	
9.	ue by May 1, 2004 MANAGING MEMBER	RS/MANAGERS	10.			Fio		ment of State		
9. TITLE	MANAGING MEMBER	RS/MANAGERS Delete	TITLE	MGR		ADDITIC	orida Depart	ment of State	Addition	
9. TITLE NAME	MANAGING MEMBER MGR NAYLOR, PENELOPE		TITLE NAME	NAYLON	R, PE	ADDITIO	orida Depart	ment of State		
9. TITLE	MANAGING MEMBER MGR NAYLOR, PENELOPE 300 BAY DRIVE SOUTH	☐ Delete	TITLE	NAYLON	VIS	ADDITION ADD	orida Depart DNS/CHANGI E BLVD	ES Change		
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