2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 01, 2004
Secretary of State

DOCUMENT# L02000029549

Entity Name: DATAMETRIXS, LLC

Current Principal Place of Business:

818 WILKINSON STREET
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

818 WILKINSON STREET
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 01-0749308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSTON, SHUMAN
818 WILKINSON STREET
ORLANDO, FL 32803 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: MGR ( ) Delete
Name: SHUMAN, ROSTON F
Address: 818 WILKINSON STREET
City-St-Zip: ORLANDO, FL 32803

Title: MGR ( ) Delete
Name: MUELLER, ROBERT T
Address: 112 RAYMOND OAKS COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGR ( ) Delete
Name: MORALES, ANDRES
Address: 400 SUMMIT RIDGE PLACE, #216
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERT T MUELLER MGR 09/01/2004

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