



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90290 010 ****50.00

DOCUMENT # L02000032016 1. Entity Name INVISION NETWORKS OF FLORIDA LLC																																																																																																																																																											
Principal Place of Business 2465 SOUTHWEST 103RD WAY MIRAMAR, FL 33025			Mailing Address 2465 SOUTHWEST 103RD WAY MIRAMAR, FL 33025																																																																																																																																																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 02122004 Chg-LLC CR2E083 (10/03)																																																																																																																																																							
City & State		City & State																																																																																																																																																									
Zip Country		Zip Country																																																																																																																																																									
4. FEI Number 04-3732185		Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent LAYTON, MICHAEL 2465 SOUTHWEST 103RD WAY MIRAMAR, FL 33025																																																																																																																																																							
7. Name and Address of New Registered Agent Name Robert A. Henry Street Address (P.O. Box Number is Not Acceptable) 2465 Southwest 103rd Way City Miramar FL Zip Code 33025																																																																																																																																																											
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 Robert A. Henry DATE 4 March 2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																																											
Filing Fee is \$50.00 Due by May 1, 2004																																																																																																																																																											
Make check payable to Florida Department of State																																																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding: 2px;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left; padding: 2px;">10. 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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: Robert A. Henry DATE 4 March 2004 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																																																																																																																																																											