2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2005
Secretary of State

DOCUMENT# L02000032691

Entity Name: THE TERA GROUP, LLC

Current Principal Place of Business:

PO BOX 1351
FORT LAUDERDALE, FL 33302 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1351
FORT LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 32-0045809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAF, RICHARD
833 N.W. 81 TERRACE
PLANTATION, FL 33328 US

Name and Address of New Registered Agent:

GRAF, RICHARD
833 N.W. 81 TERRACE
PLANTATION, FL 33324 US

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: RICHARD GRAF 01/06/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	TERAZAWA, JOANNE	
Address:	PO BOX 1351	
City-St-Zip:	FORT LAUDERDALE, FL 33302 US	
Title:	MGR	( ) Delete
Name:	GRAF, RICHARD	
Address:	P.O. BOX 1351	
City-St-Zip:	FORT LAUDERDALE, FL 33302	
Title:	MGR	( ) Delete
Name:	GRAF, JASON M	
Address:	P.O. BOX 1351	
City-St-Zip:	FORT LAUDERDALE, FL 33302	

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: JASON M. GRAF MGR 01/06/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date