2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SKINNING MANAGENGE

5000 FILED

DOCUMENT # L02000033294 1. Entity Name MOCCA 11.C						04 MAY 2	1 AM 9: (10 '	~	
MOCCA,	ГГС					SECRETAL TALLAHAS	W 050-	J3:		
	·			W. Fr		IALLAHAS!	SEE. FI ORI	E,~		
Principal Place	e of Business I -L-KFV-R D	Mailing Address 888 BRICKELL KEY DR				•	20111	JA	7	
APT 907		APT 907						· ***		
MIAMI; FL. 3	313 1	MIAMI, FL 33131								
2 Principal Place of Business 801 Brickell KCY Blvd		3. Mailing Address BOI Brickell Key Blud								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03142003	Chg-LLC	CR2E083 (16	0/03)		
City & Stat	mi, Florida	City & State Mi Qmi, T	FLorid	a	4. FEI Numb 55-081			-	plied For t Applicable	
Zip 331	Country	33131	Country		5. Certificate	of Status Desired		O Add		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
CABAL MODESTO				Name Com/, Modesto						
888 BRICKELL KEY DR APT 907				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL	. 33145			801	Bria	Kell K	ey BN	id	#1104	
			City	Mi	OMi	——————————————————————————————————————	FL	o Code	(جرا	
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										
signature	tions of registal ed eigent.	4.								
	Signature, typed or project name of registered agent at	nd title if applicable. (NOTE:	Registered Agent sign	ature required	when reinstating)		DATE			
Filing Fee is \$50.00 Due by Sectomber 8, 2004										
/Fil	ling Fee is \$50.00						ce check payable.			
Due t	by September 8, 2004						ce check payable a Department of		•	
Due t	by September 8, 2004 MANAGING MEMBER		10-	1 .		Florid	/CHANGES	State		
Due t	by September 8, 2004	RS/MANAGERS	10.			ADDITIONS	/CHANGES	hange	Addition	
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGR CABAL, MODESTO 888 BRIGKELL KEY DRIVE, UNIT	☐ Delete	TITLE NAME STREET ADDRESS	108	Brick	ADDITIONS .ell Key	CHANGES STORES	hange	Addition	
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NG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #