2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000033719

1. Entity Name
TEN THOUSAND GALLONS, LLC

FILED
Feb 03, 2005 08:00 AM
Secretary of State

Principal Place of Business

1350 NORTH OCEAN BOULEVARD POMPANO BEACH, FL 33062 Mailing Address

1350 NORTH OCEAN BOULEVARD POMPANO BEACH, FL 33062



01212005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 14-1871771 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WEISMAN, DAVID 2021 TYLER STREET -HOLLYWOOD, FL 33020

CITY-ST-ZIP

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IN THIS SPACE

	The above named entity submits this statement for the purpose of ch the obligations of registered agent.	nanging its registered office or registered agent, or both, is	n the State of Florida. I am familiar with, an	d accept
SIC	NATURE			
Oi.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE. Registered Agent signature required when reinstaling)	DATE	

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MINKIN, CAROL H 4405 WOODFIELD BLVD. BOCA RATON, FL 33434	U00000214150 02/03/05-80101-007 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MINKIN, JOSHUA 4405 WOODFIELD BLVD. BOCA RATON, FL 33434	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		

11. I hereby certify that the information supplied with this filling 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.