2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000710

Entity Name: DMS ENTERPRISES JAX LC

FILED Mar 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

219 ORANGE STREET 12469 HOLBROOK DR

NEPTUNE BEACH, FL 32266 JACKSONVILLE, FL 32225 US US

Current Mailing Address: New Mailing Address:

219 ORANGE STREET 12469 HOLBROOK DR

NEPTUNE BEACH, FL 32266 US JACKSONVILLE, FL 32225 US

FEI Number: 02-0680697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SMITH, MICHAEL SMITH, MICHAEL D 219 ORANGE STREET 12469 HOLBROOK DR

NEPTUNE BEACH, FL 32266 JACKSONVILLE, FL 32225 US 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: MICHAEL D SMITH 03/22/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

() Delete MGRM () Change (X) Addition

MICHAEL, SMITH D Name: Name: Address: Address: 12469 HOLBROOK DR City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32225 US

Title: Title: MGRM () Change (X) Addition () Delete

Name: Name: DAVID, SMITH Address: Address: 12469 HOLBROOK DR City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32225 US

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: DAVID SMITH **MGRM** 03/22/2004