2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Jan 26, 2005 08:00 AM **Secretary of State** DOCUMENT # L03000000913 1. Entity Name ZAC FURNITURE IMPORTS, LLC Principal Place of Business Mailing Address 777 NW 72ND AVENUE, SUITE 1BB1 777 NW 72ND AVENUE, SUITE 1BB1 MIAMI, FL 33126 MIAMI, FL 33126 01182005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3734675 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRASKER, PAUL DO NOT WRITE 625 NORTH FLAGLER DRIVE, 9TH FLOOR WEST PALM BEACH, FL 33401 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 <u> UCCCC0197042</u> MANAGING MEMBERS/MANAGERS 9. 01/26/05-80090-008 50.00 MGR TITLE NAME ZACZAC, LOURDES 777 NW 2ND AVENUE, SUITE 1BB1 STREET ADDRESS MIAMI, FL 33126 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE 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 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED