2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

URE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Feb 21, 2005 08:00 AM Secretary of State

954-28-1680

Daytime Prione #

DOCUI 1. Entily Nam SORISO			Secretary of State	
Principal Place of Business Mailing Address C/O LAW OFFICES OF SALLY N. SAWH, P.A. 1054 KANE CONCOURSE 1054 KANE CONCOURSE BAY HARBOR ISLANDS, FE 33154 BAY HARBOR ISLANDS, FL 3315				
DO NOT WRITE IN THIS SPAC		CE	01252005No Chg-LLC CR2E083 (10/03) 4. FEI Number	
5. Name and Address of Current Registered Agent DELLA CASA, PAOLO C/O LAW OFFICES OF SALLY N. SAWH, P.A. 1054 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154		DO NOT WRITE 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 named of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OATE				
Filing Fee is \$50.00 Due by May 1, 2005				
9. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBERS/MANAGERS MGRM DELLA CASA, PAOLO C/O 1054 KAN CONCOURSE BAY HARBOR ISLANDS, FL 33154		000000238795 02/22/05-88014-018 50.00	
CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE			DO NOT WRITE IN THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP		_	IN THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filing does not qualify for the ex-	emption stated in S	ection 119.07(3)(i), Florida Statutes I further certify that the information	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes 1 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.				