

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 18, 2005
Secretary of State**

DOCUMENT# L03000001752

Entity Name: ELEVANT LC

Current Principal Place of Business:

9429 HARDING AVENUE
SUITE #06
BAL HARBOUR, FL 33154 US

New Principal Place of Business:

9429 HARDING AVENUE
SUITE #06
MIAMI, FL 33154 US

Current Mailing Address:

9429 HARDING AVENUE
SUITE #06
BAL HARBOUR, FL 33154 US

New Mailing Address:

9429 HARDING AVENUE
SUITE #06
MIAMI, FL 33154 US

FEI Number: 30-0145912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAUQUIER, DIMITRI
9429 HARING AVENUE #6
MIAMI, FL 33154 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GAUQUIER, DIMITRI
Address: 9429 HARDING AVENUE #6
City-St-Zip: MIAMI, FL 33154 US

Title: MGR () Delete
Name: GAUQUIER, KAREN
Address: 9429 HARDING AVENUE #6
City-St-Zip: MIAMI, FL 33154 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DIMITRI GAUQUIER

MGRM

04/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date