

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002617

Entity Name: VI COMPUTERGUY, LLC

FILED  
Apr 29, 2004  
Secretary of State

**Current Principal Place of Business:**

1221 N 74 WAY  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 841211  
HOLLYWOOD, FL 33084

**New Mailing Address:**

FEI Number: 68-0538150

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TERENCE, LINDO A  
1221 N 74TH WAY  
HOLLYWOOD, FL 33024 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: LINDO, TERENCE A  
Address: 1221 N 74 WAY  
City-St-Zip: HOLLYWOOD, FL 33024

Title: MGRM ( ) Delete  
Name: KASHMANIAN, ERIC M  
Address: 1201 N 20 AVENUE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM ( ) Delete  
Name: CHARLES, EDWARD F  
Address: 911 SW 111 WAY  
City-St-Zip: DAVIE, FL 33324

**ADDITIONS/CHANGES:**

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

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: TERENCE A LINDO

MGRM

04/29/2004

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