2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003793

Entity Name: PERFA FINANCING GROUP, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180	3789 NE 209TH TERRACE AVENTURA, FL 33180
Current Mailing Address:	**New Mailing Address:**
TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180	PO BOX 800439 AVENTURA, FL 33280

FEI Number: 82-0587578   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SERBER, DANIEL J ESQ. TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180	PEREDNIK, DANIEL 3789 NE 209TH TERRACE AVENTURA, FL 33180

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: PEREDNIK DANIEL _____ 04/27/2004
_____ Electronic Signature of Registered Agent _____ Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM   ( ) Change (X) Addition
Name: PEREDNIK, DANIEL M
Address: 3789 NE 209TH TERRACE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM   ( ) Change (X) Addition
Name: ZAYAT, MARIA J
Address: 3789 NE 209TH TERRACE
City-St-Zip: AVENTURA, FL 33180

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: PEREDNIK DANIEL M _____ MGRM _____ 04/27/2004
_____ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date