

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004874

FILED
Jul 29, 2004
Secretary of State

Entity Name: 1 LYONS TECH PARKWAY, LLC

Current Principal Place of Business:

4100 NORTH 29 TERRACE
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

4100 NORTH 29 TERRACE
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 51-0444598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: ZANGER, LEON MGRM
Address: 456 ARDSLEY RD
City-St-Zip: SCARSDALE, NY 10583

Title: MGRM () Delete
Name: ZANGER, JONATHAN MGRM
Address: 12 E 86TH ST
City-St-Zip: NEW YORK, NY 10028

Title: MGRM () Delete
Name: SPRINGER, CLAUDIA MGRM
Address: PO BOX 448
City-St-Zip: GWYNEDD, PA 19436

Title: MGRM () Delete
Name: OLIVER, KURT MGRM
Address: 5410 NW 74TH PLACE
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM () Delete
Name: OLIVER, STELLA MGRM
Address: 1443 NE 55TH ST
City-St-Zip: FT LAUDERDALE, FL

Title: MGRM () Delete
Name: PETROCELLI, PAT MGRM
Address: 13190 TELFAIR AVE
City-St-Zip: SYLMAR, CA 91342

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:

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

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

Title: MGR (X) Change () Addition
Name: PETROCELLI, PAT MGR
Address: 13190 TELFAIR AVE
City-St-Zip: SYLMAR, CA 91342

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: PAT PETROCELLI

MGR

07/29/2004

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