

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006161

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: IMAGE FINANCE LLC

## Current Principal Place of Business:

3923 LAKE WORTH ROAD  
SUITE 213  
LAKE WORTH, FL 33461

## New Principal Place of Business:

122 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462 US

## Current Mailing Address:

3923 LAKE WORTH ROAD  
SUITE 213  
LAKE WORTH, FL 33461

## New Mailing Address:

PO BOX 3433  
LANTANA, FL 33465 US

FEI Number: 65-1173856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IMAGE FINANCE LLC  
3923 LAKE WORTH ROAD, SUITE 213  
LAKE WORTH, FL 33461 US

## Name and Address of New Registered Agent:

ALLEN, CONNIE  
122 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462 US

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: CONNIE ALLEN

01/08/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

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

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ALLEN, CONNIE  
Address: P.O. BOX 3433  
City-St-Zip: LANTANA, FL 33465

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: CONNIE ALLEN

MGR

01/08/2004

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