

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90286 001 *****5.00
04-26-2004 90286 002 *****50.00

DOCUMENT # L03000008245 1. Entity Name FIRST CHANCE ASSETS MANAGEMENT, LLC			
Principal Place of Business 1725 MAIN STREET, SUITE 205 WESTON, FL 33326		Mailing Address 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	
2. Principal Place of Business 2800 BLADE CIRCLE Suite, Apt. #, etc. SUITE # E-102 City & State WESTON, FL Zip 33327		3. Mailing Address 2800 BLADE CIRCLE Suite, Apt. #, etc. SUITE # E-102 City & State WESTON, FL Zip 33327	
4. FEP Number 37-1461361		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent ILEANA ARIAS TOVAR, ESQ. 1725 MAIN STREET, SUITE 205 WESTON, FL 33326		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
Filing Fee is \$50.00 Due by May 1, 2004.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PASSARO, MAURICIO 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTERO, BEATRIZ 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTERO, ELENA 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTERO, ELENA 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	☐ Delete	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTERO, ELENA 1725 MAIN STREET, SUITE 205 WESTON, FL 33326	☐ Delete	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____		ANTONIETTA DIOS 04/23/04 954-515-0301	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	