2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2004
Secretary of State

DOCUMENT# L03000008841

Entity Name: INTELIGRATE, LLC

Current Principal Place of Business:

145 MENORES AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

2025 BRICKELL AVENUE
APT 501
MIAMI, FL 33129

Current Mailing Address:

145 MENORES AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

2025 BRICKELL AVENUE APT 501
MIAMI, FL 33129

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERNANDEZ, DAVID E
145 MENORES AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MARTINEZ, BEATRIZ
2025 BRICKELL AVE APT 501
MIAMI, FL 33129 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: BEATRIZ MARTINEZ 07/03/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: FERNANDEZ, DAVID E
Address: 145 MENORES AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete
Name: ARISSO, CHRISTOPHER R
Address: 145 MENORES AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete
Name: MARTINEZ, BEATRIZ M
Address: 145 MENORES AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MARTINEZ, BEATRIZ
Address: 2025 BRICKELL AVENUE APT 501
City-St-Zip: MIAMI, FL 33129

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: BEATRIZ MARTINEZ PRES 07/03/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date