

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009663

Entity Name: MONITHOR U.S.A., L.L.C.

FILED  
Mar 29, 2004  
Secretary of State

## Current Principal Place of Business:

6021 LE LAC ROAD  
BOCA RATON, FL 33496

## New Principal Place of Business:

5030 CHAMPION BLVD G6, #408  
BOCA RATON, FL 33496

## Current Mailing Address:

6021 LE LAC ROAD  
BOCA RATON, FL 33496

## New Mailing Address:

5030 CHAMPION BLVD G6, #408  
BOCA RATON, FL 33496

FEI Number: 20-0735642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LESLIE ALAN ROZENCWAIG, P.A.  
ONE S.E. THIRD AVENUE, SUITE 960  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

MOROS, BLAS G  
6021 LE LAC ROAD  
BOCA RATON, FL 33496 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: BLAS G. MOROS

03/29/2004

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: MOROS, BLAS G  
Address: 6021 LE LAC ROAD  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGRM ( ) Change (X) Addition  
Name: MOROS, KARIN G  
Address: 6021 LE LAC ROAD  
City-St-Zip: BOCA RATON, FL 33496 US

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: BLAS G. MOROS

CEO

03/29/2004

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