2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Oct 01, 2004 8:00 am Secretary of State

ANNUAL REPURI							10 01 2004 00020 000 ****50 00				
DOCUMENT # L03000010714 1. Entity Name SVTALITHA, LLC						10-01-2004 90029 008 ****50.00 44U86463					
Principal Place of Business Mailing Address						ţ	~400	6463	\$		
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2. Principal P	lace of Busin	ness	3. Mailing Address					3111 1 1			
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			09202004	Chg-LLC	CB2F0	083 (10/03)		
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Zip	Zip Country		Zip Country			5. Certificate of Status Desired					
	6 Name	and Address of Current	Registered Acent			7 Name and	Address of New Re	nietered		<u>, </u>	
	O. Name	s and Address of Current	negisiered Agent		Name	r. Hallie and	Address of New No	gistoren	- yeni		
CARSON.	DALE C	_	• • • •	L							
1511-000	DWIN ST	REET 2254 R	erside Ave Street Address			P.O. Box Numbe	r is Not Acceptable)			
JACKSON				H							
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		ty submits this statement fo tered agent.	the purpose of changing its re	egistered	d office or register	red agent, or boti	h, in the State of Flo	rida. Lam	familiar with,	and accept	
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SIGNATURE .	Cinesture trans	d or printed name of registered agent	and title if another hip (NOTE, P	Designated (Apont signature ma iron	tubon rainatalian)		28/19	<u> </u>		
	Signature, typec	or printed name of registered agent	and the ii applicable. (NOTE: R		Agent signature required	when reinstating)		DATE			
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9.		MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGE	3		
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SIGNAT	TURE:						9/28/0	4 70	4 207	744 Z	
	SIGNATURE	AND TYPED OR DEINTED NAME O	F SIGNING MANAGING MEMBER, MANA	GER. OR A	AUTHORIZED REPRES	ENTATIVE	Date		Daytime Phone #		