2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 19, 2005 08:00 AM Secretary of State

	ANNUAL REPORT		TCD 17, 2003 00.00 F
DOCUMENT # L03000015443			Secretary of State
1. Entity Nan MIAMI FE	ERRY CONTRACTORS, LLC		
3814 CURTI	ce of Business Mailing Address SS PKWY 3814 CURTISS PKWY RDENS, FL 33166 VIRGINIA GARDENS, FL 33166	3	# 100/1001 BIT 10/10 FINE 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/ 10/1/
DO NOT WRITE IN THIS SPACE		CE	01192005No Chg-LLC
			4. FEI Number 43-2015249 Applied For Not Applicable Scottingle of Status Posited \$5.00 Additional
			5. Certificate of Status Desired Fee Required
6, Name and Address of Current Registered Agent			
AMERICAN INFORMATION SERVICES, INC. ONE SE THIRD AVE, 28TH FLOOR MIAMI, FL 33131		**************************************	DO NOT WRITE IN THIS SPACE
the obligations of registered agent. Signature, typed or printed name of registered agent and trile if applicable. (NOTE: Registered Agent signature required when remaining) Filling Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS	MGRM FORGIA, VITULA 3814 CURTISS PKWY		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIRGINIA GARDENS, FL 33166		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE		- e	* * * *

11. I hereby certify that the information supplied with this filling 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING-MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP

MIKE HONNISYN

Disysme Phone #