

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # L03000015964	
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1. Entity Name
L&D LLC

Principal Place of Business
**20423 STATE ROAD 7 F6
#253
BOCA RATON, FL 33498**

Mailing Address
**20423 STATE ROAD 7 F6
#253
BOCA RATON, FL 33498**



02052004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 73-1665233	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LESMESS, ANA MARIA
7856 MONARCH COURT
DELRAY BEACH, FL 33446**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

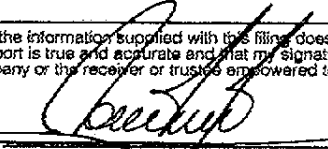
**Filing Fee is \$50.00
Due by May 1, 2004**

UN0000100031
03/31/04-80029-022 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LESMESS, JAIME R 7856 MONARCH COURT DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DUQUE, SANTIAGO 7856 MONARCH COURT DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR LESMESS, ANA MARIA 7856 MONARCH COURT DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: 

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

561-638 1472