2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 02, 2004 8:00 am Secretary of State

DOCUMENT # L03000017221 1. Entity Name JADE TRANSLATIONS, LLC				03-02-2004 90146 012 ****55.00			
Principal Place of Business Mailing Address 100 SE 2ND ST., STE. 2330 100 SE 2ND ST., STE. 23 MIAMI, FL 33131 MIAMI, FL 33131			2330				
2. Principal F	Place of Business CORAL WAY	3. Mailing Address	(
Suite, Apt. #, etc. SUITE 517, STA P Suite, Apt. #, etc.			idem	02272004 Chg-LLC CR2E083 (10/03)			
City & State City & State				4. FELNumber 56 2392727	Applied For Not Applica	—	
きょう		Zíp	Country	5. Certificate of Status Desired	\$5.00 Additional Fee Required	ibie	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name						\exists	
				JANINE DE KUYVER			
		s (P.O. Box Number is Not Acceptable)					
			ì	idem as above			
			City	FL	Zip Code		
8. The above the obligat	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office or regist	tered agent, or both, in the State of Florida. I am t	amiliar with, and acce	ept	
SIGNATURE.	Signature, typed or printed name of registrated agent as	nd tate if applicable. (NOTE	: Registered Agent signature requi	red when remestating) DATE			
Filing Fee is \$50.00 Make check payable to Due by May 1, 2004 Florida Department of State							
9. DRE	MANAGING MEMBER		10.	ADDITIONS/CHANGES			
MAME	DE RUYVER, JANINE	☐ Delete	TITLE NAME		Change	tion	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE TITLE NAME	certify that the information supplied with I on this report is true and accurate and in bility company or the receiver of trustee	☐ Delete ☐ Delete ☐ this filling does not qualify for that my signature shall have the	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP The exemption stated in Section 19 18 18 18 18 18 18 18 18 18 18 18 18 18	Section 119 07(3)(i), Florida Statutes. I further cert i made under cath, that I am a managing membe upter 608, Florida Statutes.	☐ Change ☐ Addit	ition	
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