

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L03000018620

Entity Name: XTATIC USA, L.L.C

Current Principal Place of Business:

4513 W. ATLANTIC BLVD
1916
COCONUT CREEK, FL 33066

New Principal Place of Business:

Current Mailing Address:

4513 W. ATLANTIC BLVD
1916
COCONUT CREEK, FL 33066

New Mailing Address:

FEI Number: 02-0693347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINSON, JONATHAN S
4513 W. ATLANTIC BLVD
1916
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM (X) Delete
Name: RHEINGOLD, NEITH K SR.
Address: 4513 W. ATLANTIC BLVD. #1916
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGRM (X) Delete
Name: NELSON, BERT III
Address: 4513 ATLANTIC BLVD. #1916
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGRM () Delete
Name: WILKINSON, JONATHAN
Address: 4513 ATLANTIC BLVD. #1916
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGRM (X) Delete
Name: MEHMET, MARK
Address: 4513 ATLANTIC BLVD. #1916
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JONATHAN WILKINSON

MGRM

04/30/2004

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