## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000020212

**Current Principal Place of Business:** 

PEMBROKE PINES, FL 33024

Entity Name: DEVECIA INTERNATIONAL HOLDINGS, LLC

FILED Mar 02, 2004 Secretary of State

Date

**New Principal Place of Business:** 

1840 CORAL WAY, 4TH FLOOR MIAMI, FL 33145	
Current Mailing Address:	New Mailing Address:
2331 NORTHWEST 96TH TERRACE, SUITE #17H	10740 N PRESERVE WAY

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

204

MIRAMAR, FL 33025

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET, 4TH FLOOR MIAMI, FL 33145 US

() Delete

Electronic Signature of 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:

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

**MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** () Delete Title: ( ) Change (X) Addition DWYER, DWIGHT A Name: Name: Address: Address: 10740 N PRESERVE WAY #204 MIRAMAR, FL 33025 City-St-Zip: City-St-Zip: Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: AUSTIN JR., DEVERELL A Address: Address: 10740 N PRESERVE WAY #204 City-St-Zip: City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: MGRM ( ) Change (X) Addition OMALLY, NADIA Name: Name: 10740 N PRESERVE WAY #204 Address: Address: City-St-Zip: City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: SMALL, PAULINE P 10740 N PRESERVE WAY #204 Address: Address: City-St-Zip: City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: MGR ( ) Change (X) Addition AUSTIN, DEVERELL A Name: Name: 10740 N PRESERVE WAY #204 Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIRAMAR, FL 33025

OMALLY, NADINE A

MIRAMAR, FL 33025

10740 N PRESERVE WAY #204

( ) Change (X) Addition

SIGNATURE: NADIA OMALLY MGRM 03/02/2004