2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 08, 2005 08:00 AM Secretary of State

DOCUME 1. Entity Name LFR, LLC	ENT # L030000213	38		Secretary of State
Principal Place of I 3814 CURTISS PI VIRGINIA GARDEN	KWY	Meiling Address 3814 CURTISS PKWY VIRGINIA GARDENS, FL 33166	us	- 1 10 0 17 77 7 10 17 78 70 18 71 71 10 70 71 10 70 70 70 70 70 70 70 70 70 70 70 70 70
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HORNSTEIN, MIKE 3814 CURTISS PKWY VIRGINIA GARDENS, FL 33166				DO NOT WRITE IN THIS SPACE
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 required when remaining) DATE Filling Fee is \$50.00 Due by May 1, 2005				
NAME LA STREET ADDRESS 38 CITY-ST-ZIP VIF TITLE MC NAME LA STREET ADDRESS 38	MANAGING MEMBERS GRM I FORGIA, VITO 114 CURTISS PKWY. RGINIA GARDENS, FL 33166 GRM I FORGIA, LUCRETIA 114 CURTISS PKWY. RGINIA GARDENS, FL 33166	S/MANAGERS		U00000255723 03/08/05-80025-023 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				DO NOT WRITE IN THIS SPACE
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11. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 recultred by Chapter 608, Florida Statutes.

Date

Daytime Phone #

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

SIGNATURE: _