

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021820

FILED  
May 24, 2005  
Secretary of State

**Entity Name:** UNIFIED STRATEGIES OF AMERICA, LLC

**Current Principal Place of Business:**

2500 WESTON ROAD  
SUITE 318  
WESTON, FL 33331 US

**New Principal Place of Business:**

**Current Mailing Address:**

2500 WESTON ROAD  
SUITE 318  
WESTON, FL 33331 US

**New Mailing Address:**

**FEI Number:** 84-1635681      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SANES, HAROLD  
2500 WESTON ROAD  
SUITE 318  
WESTON, FL 33331 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: MGR ( ) Delete  
Name: SANES, HAROLD  
Address: 2500 WESTON ROAD, SUITE 318  
City-St-Zip: WESTON, FL 33331 US

Title: MGR ( ) Delete  
Name: INDOVINA, PETER  
Address: 2500 WESTON ROAD, SUITE 318  
City-St-Zip: WESTON, FL 33331 US

**ADDITIONS/CHANGES:**

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: HAROLD SANES

MGR

05/24/2005

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