## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Apr 20, 2005 08:00 AM Secretary of State **DOCUMENT # L03000023016** 1. Entity Name SMK, LLC Principal Place of Business Mailing Address 1620 MAIN ST., STE. 4 1620 MAIN ST., STE. 4 SARASOTA, FL 34236 -SARASOTA, FL 34236 01032005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0055109 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETERS, MATTHEW K DO NOT WRITE 1620 MAIN ST., STE. 4 SARASOTA, FL 34236 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, typod or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature regulted when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGR PETERS, JENNIFER MANAGER NAME U00000319263 1620 MAIN STREET STREET ADDRESS 04/20/05-80091-017 50.00 CITY-ST-ZIP SARASOTA, FL 34232 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP - I described the state of the 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

ME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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 required by Chapter 608, Florida Statutes.