

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023045

FILED  
Mar 26, 2004  
Secretary of State

Entity Name: VENTURE - INVESTMENTS, LLC

## Current Principal Place of Business:

1320 NW 2ND CIRCLE  
BOCA RATON, FL 33432

## New Principal Place of Business:

1121 S. MILITARY TRAIL  
#264  
DEERFIELD, FL 33442

## Current Mailing Address:

1320 NW 2ND CIRCLE  
BOCA RATON, FL 33432

## New Mailing Address:

4364 WOODCREST RD.  
WEST VANCOUVER, BC V7S 2W1 CA

FEI Number: 31-1824883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILES, ANDREW  
1320 NW 2ND CIRCLE  
BOCA RATON, FL 33432

## Name and Address of New Registered Agent:

MILES, ANDREW  
1121 S. MILITARY TRAIL  
#264  
DEERFIELD BEACH, FL 33442 US

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: ANDREW MILES

03/26/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: WOLFF, ANITA  
Address: 4364 WOODCREST RD.  
City-St-Zip: WEST VANCOUVER, B.C. V7S2W1, CA

Title: MGRM ( ) Delete  
Name: WOLFF, GERRY  
Address: 4364 WOODCREST RD.  
City-St-Zip: WEST VANCOUVER, B.C. V7S2W1, CA

## 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: ANITA WOLFF

MGRM

03/26/2004

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