2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT# L03000025152

FILED Mar 31, 2004 8:00 am Secretary of State 03-11-2004 90224 015 ****50.00

1. Entity Name	9 🕶							
DIDES, LL	.C				Programme of the second			
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Principal Place	of Business		Mailing Address		· · · -	1	n w	
4802 51ST WEST, #1408			4802 51ST WEST, #1408			34002437		
BRADENTON FL 34210			BRADENTON FL 34210					
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2. Principal Place of Business			3. Mailing Address					
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Suite, Apt. #, etc.			Suite, Apt. #, etc.		MOORE CREE	E 083 (11/03)		
								
City & State			City & State			4. FEI Number 20-00 8 1535	 	plied For t Applicable
Zip Country			Zip Country			\$5.00 Add		
	ļ	,			,	5. Certificate of Status Desired	Fee Require	d d
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
					Name			
DIDES, KAMAL- 4802 51ST WEST, #1408					Street Address (P.O. Box Number is Not Acceptable)			
BRADENTON FL 34210								
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					City		Zip Code	8
8. The above named entity submits this statement for the purpose of changing its register					ed office or registe			and accept
	ions of regist		•	, 5			•	
SIGNATURE .								
	Signature, typed	or printed name of registered ag-	ent and title if applicable.	NOTE: Registers	id Agent signature require	ed when reinstating) DA	TE .	
•			FILE	NOW!!!	FEE IS \$50.00			
			Make Check Pa			ent of State:		
				Due By Ma	ay 1, 2004			
9.			BERS/MANAGERS	10.		ADDITIONS/CHANG		
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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)(i), 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 required by Chapter 608, Florida Statutes.

SIGNATURE: NAME OF SIGNING BROADING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE