## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR).

## FILED May 04, 2004 8:00 am Secretary of State

DOCUM 1. Entity Name NT HOLDI	e	# <b>L03000025</b> 3	381			04-	19-2004 900	41 049 ****	°50.0	0	
Principal Place of Business 220 ALTERNATE 19 NORTH			Mailing Address 220 ALTERNATE 19				<b>V = -</b> -	-			
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2. Principal Place of Business			3. Mailing Address								
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City & State			City & State			4. FEI Number			Applied For Not Applicable		
Zip Country		Zip	Zip Country		5. Certificate of St		□ \$5.00 Fee Re				
	6. Name	and Address of Curre	nt Registered Agent			7. Name and Add	ress of New Rec	Istered Agent			]
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TENENBAUM, NOEL S 220 ALTERNATE 19 NORTH PALM HARBOR FL 34683				Street Address		P.O. Box Number is i	Not Acceptable)				-
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	named entity ions of registr		for the purpose of changing i	ts registere	ed office or register	ed agent, or both, in	the State of Florid	da. I am familia	with, a	and accept	]
SIGNATURE _	Signature, typed o	or printed name of registered ag	ent and title it applicable. (NC	OTE: Registere	d Agent signature required	when reinspecing)		OATE			
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11. I hereby of indicated limited lia.	certify that the on this repor- bility compar	a information supplied of its true and accurate any or the receiver or true	with this filing does not qualify and that my signature shall has stee empowered to execute th	for the exe re the sam is report a	emption stated in So te legal effect as if r is repaired by Chap	ection 119.07(3)(i), Fl made under oath; tha oter 608, Florida Statu	orida Statutes. I f it I am a managir ites.	urther certify thang member or m	t the in anage	ntormation r of the	
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