

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000025778

**FILED**  
**Jul 13, 2004**  
**Secretary of State**

**Entity Name:** INFINITY FINANCE, L.L.C.

**Current Principal Place of Business:**

1800 SOUTH ORLANDO AVENUE, SUITE 18  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

147 SOUTH BREVARD AVENUE, SUITE 4  
COCOA BEACH, FL 32931

**Current Mailing Address:**

1800 SOUTH ORLANDO AVENUE, SUITE 18  
COCOA BEACH, FL 32931

**New Mailing Address:**

147 SOUTH BREVARD AVENUE, SUITE 4  
COCOA BEACH, FL 32931

**FEI Number:** 13-4269229

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UVARO, JASON C  
1800 SOUTH ORLANDO AVENUE, SUITE 18  
COCOA BEACH, FL 32931 US

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

UVARO, JASON C  
147 SOUTH BREVARD AVENUE, SUITE 4  
COCOA BEACH, FL 32931 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: JASON UVARO

07/13/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: UVARO, JASON C  
Address: 1800 SOUTH ORLANDO AVENUE, SUITE 18  
City-St-Zip: COCOA BEACH, FL 32931

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: UVARO, JASON C  
Address: 147 S BREVARD AVE #4  
City-St-Zip: COCOA BEACH, FL 32931

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: JASON UVARO

MGR

07/13/2004

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