SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

-d-	ANNUAL REPORT			Feb 08, 2005 08:00
1. Entity Nam	MENT # L03000027087			Secretary of State
Principal Plac 253 MINORO UNIT #506 NEW SMYRN	A BEACH WAY 1573 W. FAIRBANKS SUITE 100	-	US	
DO NOT WRITE IN THIS S			01252005 No Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent BRADLEY, ROGER 4424 NEW BROAD STREET ORLANDO, FL 32814			DO NOT WRITE IN THIS SPACE	
the obligat	ions of registered agent.		ed Agent signature required	ed agent, or both, in the State of Florida. I am familiar with, and accept when reinstating) DATE 11000000221243 02/09/05-80025-001 250.00
9. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY ST-ZIP TITLE NAME	MANAĞING MEMBERS/MANAGERS MGR BRADLEY, ROGER 4424 NEW BROAD STREET ORLANDO, FL 32814 MGR BRADLEY, NANCY M 4424 NEW BROAD STREET ORLANDO, FL 32814		and the second s	DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information sumplied with this filling does any qualify.	for the ex-	emplion stated in St	ection 119.07(3)(i), Florida Stafutes. I further certify that the information nate of the transfer of the ter 608. Florida Stafutes.