


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

03-15-2005 90351 024 \*\*\*\*50.00

<b>DOCUMENT # L03000027118</b> 1. Entity Name <b>GUSWORKS, LLC</b>	
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Principal Place of Business <b>650 S.E. THIRD AVENUE FORT LAUDERDALE, FL 33301</b>	Mailing Address <b>650 S.E. THIRD AVENUE FORT LAUDERDALE, FL 33301</b>
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30003391



02252005 No Chg-LLC CR2E083 (10/03)

4. FEI Number <b>11-3697761</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>MICHAEL A. HIRSCH, P.A. 650 S.E. THIRD AVENUE FORT LAUDERDALE, FL 33301</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HIRSCH, MICHAEL H 650 SE 3RD AVE FORT LAUDERDALE, FL 33301
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11. I hereby 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:  4/13/05 954-462-7393

SIGNATURE AND TYPED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #