2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000028744

1. Entity Name
NOTE BY NOTE LLC

Principal Place of Business	Mailing Address
2530 EAGLE RUN CIRCLE WESTON, FL 33327	2530 EAGLE RUN CIRCLE WESTON, FL 33327

DO NOT WRITE IN THIS SPACE

01102005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
73-1675659	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CREMISINI, TULIO F
2530 EAGLE RUN CIRCLE
WESTON, FL 33327

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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_____   DATE

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CREMISINI, TULIO F
STREET ADDRESS	2530 EAGLE RUN CIRCLE
CITY-ST-ZIP	WESTON, FL 33327
TITLE	MGR
NAME	CREMISINI, ELENA
STREET ADDRESS	2530 EAGLE RUN CIRCLE
CITY-ST-ZIP	WESTON, FL 33327
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/13/05-80052-003 50.00

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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: _TULIO CREMISINI_   01-10-05   954-349 3140

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