

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90279 025 ****50.00

DOCUMENT # L03000029500																																																					
1. Entity Name SBK HOLDINGS, LLC																																																					
Principal Place of Business 520 BRICKELL KEY DR, STE 0-305 MIAMI, FL 33131			Mailing Address 520 BRICKELL KEY DR, STE 0-305 MIAMI, FL 33131																																																		
2. Principal Place of Business 1902 14th Avenue Suite, Apt. #, etc.			3. Mailing Address 1902 14th Avenue Suite, Apt. #, etc.																																																		
City & State Vero Beach, FL		City & State Vero Beach, FL		4. FEI Number 20-0928477																																																	
Zip 32960		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required																																																	
6. Name and Address of Current Registered Agent TRANSGLOBAL CORPORATE ADMINISTRATION, INC 520 BRICKELL KEY DR, STE 0-305 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name: <u>Paul Schwartz</u> Street Address (P.O. Box Number is Not Acceptable): 1902 14th Avenue City: <u>Vero Beach</u> FL <u>32960</u>																																																	
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: <u>Paul Schwartz</u> DATE: <u>3/30/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																					
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to Florida Department of State																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 33%;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="width: 33%;"> Managr Paul Schwartz 1902 14th Avenue Vero Beach, FL 32960 </td> <td style="width: 33%; text-align: right;"> <input type="checkbox"/> Delete </td> <td style="width: 33%;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="width: 33%;"></td> <td style="width: 33%; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managr Paul Schwartz 1902 14th Avenue Vero Beach, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>Paul Schwartz</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				Date: <u>3/30/04</u> Daytime Phone #: <u>772-696-1700</u>																																																	

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