

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000031049

**FILED**  
**Mar 31, 2004**  
**Secretary of State**

**Entity Name:** DIGITAL PHOTOGRAPHERS OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

9188 COVE POINT CIRCLE  
BOYNTON BEACH, FL 33437 US

**New Principal Place of Business:**

26115 SW 130TH PLACE  
MIAMI, FL 33032 US

**Current Mailing Address:**

9188 COVE POINT CIRCLE  
BOYNTON BEACH, FL 33437 US

**New Mailing Address:**

26115 SW 130TH PLACE  
MIAMI, FL 33032 US

**FEI Number:** 20-0200722

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLAIBORNE, MATTHEW A  
9188 COVE POINT CIRCLE  
BOYNTON BEACH, FL 33437 US

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

CLAIBORNE, MATTHEW A  
26115 SW 130TH PLACE  
MIAMI, FL 33032 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: \_\_\_\_\_

03/31/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: CLAIBORNE, MATTHEW A  
Address: 9188 COVE POINT CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CLAIBORNE, MATTHEW A  
Address: 26115 SW 130TH PLACE  
City-St-Zip: MIAMI, FL 33032 US

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: MATTHEW A. CLAIBORNE

MGR

03/31/2004

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