

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000031920

**FILED**  
**Mar 12, 2004**  
**Secretary of State**

**Entity Name:** TOGLIA TOTAL SOLUTION LLC

**Current Principal Place of Business:**

3041 MARY ST  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

825 BRICKELL BAY DR.  
SUITE 1641  
MIAMI, FL 33131 US

**Current Mailing Address:**

3041 MARY ST  
COCONUT GROVE, FL 33133

**New Mailing Address:**

825 BRICKELL BAY DR.  
SUITE 1641  
MIAMI, FL 33131 US

**FEI Number:** 76-0739801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TOGLIA, LEONARDO  
3041 MARY ST  
COCONUT GROVE, FL 33133 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

**Title:** MGRM ( ) Delete  
**Name:** TOGLIA, LEONARDO  
**Address:** 3041 MARY ST  
**City-St-Zip:** COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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:** LEONARDO TOGLIA

MGRM

03/12/2004

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