

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033931

FILED  
Sep 09, 2004  
Secretary of State

Entity Name: ILLUMINATI WORLDWIDE LLC

## Current Principal Place of Business:

1454 BAYHARBOR DR  
17-304  
PALM HARBOR, FL 34685

## New Principal Place of Business:

18167 U.S. 19 N  
185  
CLEARWATER, FL 33764 US

## Current Mailing Address:

1454 BAYHARBOR DR  
17-304  
PALM HARBOR, FL 34685 US

## New Mailing Address:

18167 U.S. 19 N  
185  
CLEARWATER, FL 33764 US

FEI Number: 41-2107928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHARIF, CODY A  
17-304  
PALM HARBOR  
PALM HARBOR, FL 34685 US

## Name and Address of New Registered Agent:

KLIMCZUK, RAYMOND C  
17-304  
PALM HARBOR  
PALM HARBOR, FL 34685 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: RAYMOND CHARLES KLIMCZUK

09/09/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: SHERWIN, MIKE  
Address: 9927 HOBART  
City-St-Zip: WAITHILL, OH 44094 US

Title: MGRM ( ) Delete  
Name: KIMCZUK, RAYMOND SR.  
Address: 4620 EAST 88TH ST  
City-St-Zip: GARFIELD HEIGHTS, OH 44125 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CHARIF, CODY A  
Address: 1454 BAY ARBOR  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGRM (X) Change ( ) Addition  
Name: KIMCZUK, RAYMOND C  
Address: 4620 EAST 88TH ST  
City-St-Zip: GARFIELD HEIGHTS, OH 44125 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: CODY CHARIF

MGRM

09/09/2004

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