

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034689

FILED  
Mar 19, 2004  
Secretary of State

Entity Name: NOVATIONS, LLC

## Current Principal Place of Business:

1725 MAIN ST., STE. 209  
WESTON, FL 33326

## New Principal Place of Business:

6400 CONGRESS AVENUE  
SUITE 1300  
BOCA RATON, FL 334872810 US

## Current Mailing Address:

1725 MAIN ST., STE. 209  
WESTON, FL 33326

## New Mailing Address:

P.O. BOX 880327  
BOCA RATON, FL 334880327 US

FEI Number: 20-0221508

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TOVAR, JOSE GREGORIO  
ARIAS TOVAR & ASSOCIATES, P.A.  
1725 MAIN ST., STE. 209 WESTON TOWN CENTER  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

RIERA, LEONARDO  
6400 CONGRESS AVENUE  
BOCA RATON, FL 334872810 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: LEONARDO RIERA

03/19/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: RIERA, LEONARDO  
Address: 1725 MAIN ST., STE. 209  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: RIERA, LEONARDO  
Address: 6400 CONGRESS AVENUE, SUITE 1300  
City-St-Zip: BOCA RATON, FL 334872810

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 RIERA

M

03/19/2004

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