## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #1.03000035572

## FILED Jan 21, 2005 8:00 am Secretary of State

01-21-2005 90096 042 \*\*\*\*50.00

1. Entity Name TADIDAL,										
Principal Place of Business C/O ADRIANA HALIC 2600 ISLAND BLVD., APT. 705 AVENTURA, FL 33160			Mailing Address C/O ADRIANA HALIC 2600 ISLAND BLVD., APT. 705 AVENTURA, FL 33160			2000 (11 111 111 111 111 111 111 111 111 11				
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.		01112005	Chg-LLC	CR2E	83 (10/03)		
City & State			City & State		4. FEI Numt 61-14				plied For t Applicable	
Zip	Zip Country		Zip	p Country		5. Certificat	e of Status Desired		\$5.00 Add Fee Required	
	6. Name	and Address of Current R	legistered Agent			7. Name an	d Address of New R	egistered .	Agent	
	<del></del>				Name	<del>-</del> _				
MULLIN, TERRANCE J ESQ. 3059 GRAND AVENUE, SUITE 340 MIAMI, FL 33133			Street Address (F		(P.O. Box Numl	per is Not Acceptable	)			
					City	<del></del>		FL	Zip Cod	<del></del>
	named entity	y submits this statement for ered agent.	the purpose of changing its	s register	ad office or registe	ered agent, or b	oth, in the State of Flo	rida. I am	familiar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent ar	nd title if applicable. (NO	TE: Registere	d Agent signature require	od when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2005						Make check payable to Florida Department of State				
9.		MANAGING MEMBER	S/MANAGERS	10.			ADDITIONS/	CHANGES	3	
		MANAGEMENT MEMBER								
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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 eath; 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:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

EDGAR HALAC

1/15/05 35-610514 Date Daytime Phone #