

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038073

FILED
Apr 29, 2005
Secretary of State

Entity Name: FOUR AMBASSADOR HOLDINGS, LLC

Current Principal Place of Business:

5590 WEST 20TH AVE., STE. 403
HIALEAH, FL 33016

New Principal Place of Business:

14211 COMMERCE WAY
SUITE 300
MIAMI LAKES, FL 33016

Current Mailing Address:

5590 WEST 20TH AVE., STE. 403
HIALEAH, FL 33016

New Mailing Address:

14211 COMMERCE WAY
SUITE 300
MIAMI LAKES, FL 33016

FEI Number: 04-3777400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARZANO, DANIEL
3301 N.E. 32 AVE. #502
FT LAUDERDALE, FL 3308 US

Name and Address of New Registered Agent:

MARZANO, DANIEL
3301 N.E. 32 AVE. #502
FT LAUDERDALE, FL 33308 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:

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MARZANO, DANIEL
Address: 3301 N.E. 32 AVENUE #502
City-St-Zip: FT. LAUDERDALE,, FL 33308

Title: MGRM () Delete
Name: COSCULLUELA, MICHAEL
Address: 15920 WEST PRESTWICK PLACE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES:

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

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: DANIEL MARZANO

MGRM

04/29/2005

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