2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# L03000040839

Entity Name: PHOENIX INTERNATIONAL LLC

Current Principal Place of Business:

16155 SOUTHWEST 117TH AVENUE
SUITE 14
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

PO BOX 990997
MIAMI, FL 33197

New Mailing Address:

FEI Number: 20-0688163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELUMS, DAVIDA Y
16155 SOUTHWEST 117TH AVENUE
STE. 14
MIAMI, FL 33177 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:	NELUMS, DAVIDA Y	
Address:	16155 SOUTHWEST 117TH AVENUE STE 14	
City-St-Zip:	MIAMI, FL 33177	
Title:	MGRM	( ) Delete
Name:	DOTSON, JONATHAN L	
Address:	16155 SOUTHWEST 117TH AVENUE STE 14	
City-St-Zip:	MIAMI, FL 33177	
Title:	MGRM	( ) Delete
Name:	WRIGHT, RENEE S	
Address:	9957 SW 157TH STREET	
City-St-Zip:	MIAMI, FL 33157	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: DAVIDA Y NELUMS MGRM 04/30/2004

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