


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

Apr 08, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # L03000042201 1. Entity Name BOCA INVESTMENT GROUP LLC |  |
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| Principal Place of Business 8185 TWIN LAKE DRIVE BOCA RATON, FL 33496 | Mailing Address 2901 CLINT MOORE RD STE 410 BOCA RATON, FL 33496-2041 |
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04052005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 20-0354177 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent SOLOMON, MARC 2600 N. MILITARY TRAIL SUITE 290 BOCA RATON, FL 33431 |
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2005**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM BENEJAM, GUSTAVO 8185 TWIN LAKE DRIVE BOCA RATON, FL 33496 |
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U000000294056
04/08/05-80053-012 \$5.00

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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)(f), 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 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:  **4/5/05** **561.483-0220**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #