

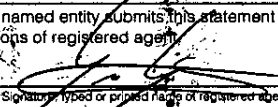
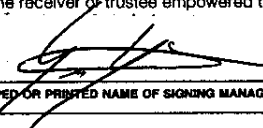


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90026 004 \*\*\*\*55.00

<b>DOCUMENT # L03000052004</b> 1. Entity Name <b>NEUVERT, KELLER &amp; MULLINS, LLC</b>																																																																											
Principal Place of Business <b>1702 ACKERMAN DR. STE 1</b> <b>LODI, CA 95240-6384</b>			Mailing Address <b>1702 ACKERMAN DR. STE 1</b> <b>LODI, CA 95240-6384</b>																																																																								
2. Principal Place of Business <b>201 MORSE PLAZA</b> Suite, Apt. #, etc.		3. Mailing Address <b>2533 N. CARSON ST.</b> Suite, Apt. #, etc. <b>STE. # 5543</b>																																																																									
City & State <b>Fort MYERS, FL</b> Zip <b>33905</b>		City & State <b>CARSON CITY, NV</b> Zip <b>89706</b>		4. FEI Number 04082004 Chg-LLC CR2E083 (10/03)																																																																							
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$5.00</b> Additional Fee Required																																																																							
6. Name and Address of Current Registered Agent  <b>BUSINESS FILINGS INCORPORATED</b> <b>600 E JEFFERSON ST</b> <b>TALLAHASSEE, FL 32304</b>				7. Name and Address of New Registered Agent Name <b>ERIC NEUVERT</b> Street Address (P.O. Box Number is Not Acceptable) <b>201 MORSE PLAZA</b> City <b>Fort MYERS</b> <b>FL</b> Zip Code <b>33905</b>																																																																							
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  <b>ERIC NEUVERT</b> DATE <b>4/7/04</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>																																																																											
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2004</b>		<b>Make check payable to</b> <b>Florida Department of State</b>																																																																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;">NAME</td> <td style="width:30%;">STREET ADDRESS</td> <td style="width:10%;">CITY-ST-ZIP</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td></td> <td><b>MGR</b></td> <td><b>PARADIGM DEVELOPMENT INTERNATIONAL, LLC</b></td> <td><b>1702 ACKERMAN DR. STE 1</b></td> <td></td> </tr> <tr> <td></td> <td></td> <td><b>LODI, CA 95240-6384</b></td> <td></td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>MGR</b>	<b>PARADIGM DEVELOPMENT INTERNATIONAL, LLC</b>	<b>1702 ACKERMAN DR. STE 1</b>				<b>LODI, CA 95240-6384</b>			10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;">NAME</td> <td style="width:30%;">STREET ADDRESS</td> <td style="width:10%;">CITY-ST-ZIP</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td><b>2533 N. CARSON ST. STE. 5543</b></td> <td><b>CARSON CITY, NV 89706</b></td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			<b>2533 N. CARSON ST. STE. 5543</b>	<b>CARSON CITY, NV 89706</b>																																														
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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 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.																																																																											
<b>SIGNATURE:</b>  <b>ERIC NEUVERT</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				Date <b>4/7/04</b> Daytime Phone # <b>239-292-6381</b>																																																																							