

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053881

FILED
Feb 09, 2004
Secretary of State

Entity Name: DSJI/RABAT, L.L.C.

Current Principal Place of Business:

1930 SAN MARCO BOULEVARD, SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1930 SAN MARCO BOULEVARD, SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEPRELL, SAMUEL L
1930 SAN MARCO BOULEVARD, SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207

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: DIVERSIFIED SYSTEMS, OF JAX, INC.
Address: 1930 SAN MARCO BOULEVARD, SUITE 201
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Delete
Name: LEPRELL, SAMUEL L
Address: 1930 SAN MARCO BOULEVARD, SUITE 201
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Delete
Name: CONCEPT DEVELOPMENT, INTERNATIONAL, INC.
Address: 9954 MOORINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

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: SAMUEL L. LEPRELL

MGRM

02/09/2004

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