

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053932

FILED
Apr 12, 2004
Secretary of State

Entity Name: TABOR KNIVES, L.L.C.

Current Principal Place of Business:

18925 CROOKED LANE
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

18925 CROOKED LANE
LUTZ, FL 33548

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TABOR, TIMOTHY M
18925 CROOKED LANE
LUTZ, FL 33548

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: TABOR, TIMOTHY M
Address: 18925 CROOKED LANE
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES:

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: TIMOTHY M. TABOR

MGRM

04/12/2004

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