


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000055894 1. Entity Name HIB, LLC	
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Principal Place of Business 14378 CYPRESS ISLAND COURT PALM BEACH GARDENS, FL 33410	Mailing Address 14378 CYPRESS ISLAND COURT PALM BEACH GARDENS, FL 33410
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DO NOT WRITE IN THIS SPACE



02072005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0937868	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BIR, ALLAN C 14378 CYPRESS ISLAND COURT PALM BEACH GARDENS, FL 33410
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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 <small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>(NOTE: Registered Agent signature required when reinstating)</small>	DATE
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**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	BIR, ALLAN C
STREET ADDRESS	14378 CYPRESS ISLAND COURT
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33410
TITLE	MGR
NAME	SALEWICZ, RICHARD J
STREET ADDRESS	3128 DONEGAL CIRCLE
CITY - ST - ZIP	WESTFIELD, IN 46074
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000254967
03/07/05-80095-006 50.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: 	Date 2/24/05	Daytime Phone # (317) 549-4290
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		