2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# L04000014567

Entity Name: SHINE MARK SYSTEMS, LLC

Current Principal Place of Business:

2620 COVE CAY DRIVE
#106
CLEARWATER, FL 33760 US

New Principal Place of Business:

4859 INVERNESS COURT
#105
PALM HARBOR, FL 34685 US

Current Mailing Address:

2620 COVE CAY DRIVE
#106
CLEARWATER, FL 33760 US

New Mailing Address:

4859 INVERNESS COURT
#105
PALM HARBOR, FL 34685 US

FEI Number: 33-1085118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLAUDE, PATRICIA A
2620 COVE CAY DRIVE
106
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

CLAUDE, PATRICIA A
4859 INVERNESS COURT
105
PALM HARBOR, FL 34685 US

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: PATRICIA CLAUDE 02/22/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: CLAUDE, PATRICIA A
Address: 2620 COVE CAY DRIVE #106
City-St-Zip: CLEARWATER, FL 33760 US

Title: MGRM ( ) Delete
Name: HUBER, WILLIAM H
Address: 2620 COVE CAY DRIVE #106
City-St-Zip: CLEARWATER, FL 33760 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CLAUDE, PATRICIA A
Address: 4859 INVERNESS COURT #105
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGRM (X) Change ( ) Addition
Name: HUBER, WILLIAM H
Address: 4859 INVERNESS COURT # 105
City-St-Zip: PALM HARBOR, FL 34685 US

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: PATRICIA CLAUDE MGR 02/22/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date