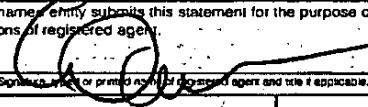
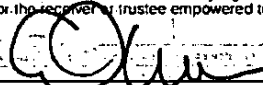


FILED
Apr 11, 2005 8:00 am
Secretary of State

01-28-2005 90073 044 ****50.00

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000020731			
1. Entity Name AA DESIMONE HOLDINGS, LLC			
Principal Place of Business 2110 N. OCEAN BOULEVARD FT. LAUDERDALE, FL 33305		Mailing Address 2110 N. OCEAN BOULEVARD FT. LAUDERDALE, FL 33305	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent SNYDER & SNYDER, P.A. 7931 S.W. 45TH STREET DAVIE, FL 33328		7. Name and Address of New Registered Agent Name: Desimone Alfred A Street Address (P.O. Box Number is Not Acceptable) 2110 N Ocean Blvd Apt 1802 City: Ft Lauderdale FL Zip Code 33305	
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: 		DATE: 1/25/05	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SPLENDORE, MARCEL 11200 BRITTANY OAKS DRIVE CHARLOTTE, NC 28277	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DESIMONE, ALFRED A 2110 N. OCEAN BOULEVARD FT. LAUDERDALE, FL 33305	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: 1/25/05 951-389-7025	

30003265



01212005 Chg-LLC CR2E083 (10/03)

4. FEI Number 20-1871356 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required