

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029507

Entity Name: NEW VIEW AMERICA, LLC

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

1126 ALEXANDER BEND
WESTON, FL 33327 US

New Principal Place of Business:

2255 GLADES ROAD
234 W
BOCA RATON, FL 33431 US

Current Mailing Address:

318 INDIAN TRACE ROAD
723
WESTON, FL 33326 US

New Mailing Address:

2255 GLADES ROAD
234 W
BOCA RATON, FL 33431 US

FEI Number: 75-3163282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOOR, CRYSTAL
2255 GLADES RD., SUITE 234W
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

MOOR, CRYSTAL
2255 GLADES ROAD
234W
BOCA RATON, FL 33431 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: CRYSTAL T. MOOR

01/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MOOR, CRYSTAL
Address: 560 BROADHOLLOW ROAD, SUITE 308
City-St-Zip: MELVILLE, NY 11747 US

Title: MGRM (X) Delete
Name: BEREZKINA, LILIA
Address: 944 CYPRESS DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOOR, CRYSTAL T
Address: 2255 GLADES ROAD STUITE 234W
City-St-Zip: BOCA RATON, FL 33431 US

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: CRYSTAL T. MOOR

MGR.

01/11/2005

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