2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 22, 2005 8:00 am Secretary of State 02-21-2005 90176 013 ****50.00

S. Certificate of Status Desired	DOCU 1. Entity Nam III T VICT	10	# L04000030' krk, llc	160				02-21-2	:005 901	176 013 ***	50.00
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ZD Country ZD Country S. Certificate of Status Desired April Name MURRAY, DAVID G. 1401 EAST BROWARD BLVD STE. 200 FORT LAUDERDALE, FL 33301 City FL Zo Code To Country FL Zo Code City FL Zo Code City FL Zo Code City FL Zo Code To Country FL Zo Code The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both in the State of Plotida. I am familiar with, and a check payable to the designations of registered agent. Status Sta	Suita, Apt. #, etc.						02102005	Chg-LLC	CR2E	:083 (10/03)	
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MURRAY, DAVID G 1401 EAST BROWARD BLVD STE, 200 FORT LAUDERDALE, FL 33301 City FL Zip Code The above named onthly submits this statement for the purpose of changing its registered objects or registered agent or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the obligations of registered agent, or both, in the State of Rondol. I am lamiliar with, and all the products of Rondol. I am lamiliar with, and all the registered agent, or both, in the State of Rondol. I am lamiliar with, and all the registered agent, or both, in the State of Rondol. I am lamiliar with, and all the registered agent, or both, in the State of Rondol. I am lamiliar with, and all the registered agent, or both, in the State of Rondol. I am lamiliar with, and all the Rondol. I am lamiliar with, and all the registered agent, or both, in the Rondol. I am lamiliar with, and all the Rondol. I am lamiliar with, and all the Rondol. I am lamiliar with, and all the Rondol. I am lamiliar with and all the Rondol. I am lamiliar with and all the Rondol. I am lamiliar all the Rondol.	Žīρ		Country	Zip	Coun	ntry	5. Certificat	e of Status Desired			
Stool Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE, FL 33301 City FL Zip Code 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 Rointid. I am ternitar with, and at the obligations of registered agent. SIGNATURE Filling Fee is \$50.00 Bue by Mary 1, 2003 References Signature and the research part and the registered of State P. MANAGING MEMBERS/MANAGERS III. MAGE TURCHIN, LESLIE S SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS CITY-51-29 FORT LAUDERDALE, FL 33394 TITLE MAGE SIRET ADDRESS CITY-51-29 TITLE MAGE SIRET ADDR		6. Name	and Address of Current F	Registered Agent		Name	7. Name an	d Address of New	Registered	Agent	
City FL Zip Code 8. The above named critisy 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 an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of registered agent, or both, in the State of Florida. I am familiar with, and an objective of Florida. I am familiar with, and an objective of Florida. I am familiar with, and an objective of Florida Department of State of Florida Statutes. I Author certify that the information supplied with this filing does not qualify for the examption stand of Section 119.07(3)(i), Plorida Statutes. I Author certify that the information included on this report is tiple and accurate and that my signature shall not the registered agent and state of Section 119.07(3)(i), Plorida Statutes. I Author certify that the information included on this report is the information componed to the information supplied with this filing does not qualted to force the situation of the information supplied with this filing does not qualted to force the situation of the part of the information of the ini						Street Addres	s (P.O. Box Numi	per is Not Acceptat	zie)		
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