

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045538

Entity Name: LESNAH, LLC

FILED  
Apr 11, 2005  
Secretary of State

## Current Principal Place of Business:

4400 NORTH FEDERAL HIGHWAY, SUITE 210  
BOCA RATON, FL 33431

## New Principal Place of Business:

3495 N. DIXIE HWY  
UNIT 3  
BOCA RATON, FL 33431

## Current Mailing Address:

4400 NORTH FEDERAL HIGHWAY, SUITE 210  
BOCA RATON, FL 33431

## New Mailing Address:

4750 S. OCEAN BLVD.  
110  
HIGHLAND BEACH, FL 33487

FEI Number: 20-1256123

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOVAR, ILEANA A ESQ.  
ARIAS TOVAR & ASSOCIATES, P.A.  
1725 MAIN STREET, SUITE 209  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: LICCIARDINO, MARIO  
Address: 4750 S. OCEAN BLVD. #110  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: MGR ( ) Change (X) Addition  
Name: LICCIARDINO, HANSEL  
Address: 4750 S. OCEAN BLVD #110  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: MGR ( ) Change (X) Addition  
Name: LICCIARDINO, HAROLD  
Address: 4750 S. OCEAN BLVD. #110  
City-St-Zip: HIGHLAND BEACH, FL 33487

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: HAROLD LICCIARDINO

MGR

04/11/2005

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