

SENT BY: BARBARA BROOKES;

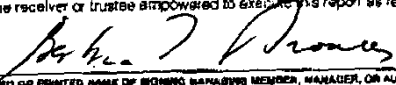
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FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90041 022 ***55.00

**2005 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L04000065962																											
1. Entity Name OKLA-TEX, LLC																											
Principal Place of Business 2742 N.E. THIRD STREET POMPANO BEACH, FL 33062		Mailing Address 2742 N.E. THIRD STREET POMPANO BEACH, FL 33062																									
2. Principal Place of Business 2742 NE 3 ST Pompamo Beach FL		3. Mailing Address SAME																									
Suite, Apt. #, etc. Pompamo Beach FL		Suite, Apt. #, etc.																									
City & State FL		City & State																									
Zip 33062		Country BROWARD																									
4. FEI Number 20-16-85666		Applied For Not Applicable																									
5. Certificate of Status Desired		☒ \$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent BROOKES, BARBARA S 2742 N.E. THIRD STREET POMPANO BEACH, FL 33062		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 Florida. I am familiar with, and accept the obligations of registered agent.																											
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date of signature. (NOTE: Registered Agent signature required when reappointing)																											
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																									
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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 606, Florida Statutes.																											
SIGNATURE: 		Date: July 17 2005																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																											

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