


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90104 007 ****50.00

DOCUMENT # L04000071009	
1. Entity Name FIRST VENUS MANAGEMENT, L.L.C.	

Principal Place of Business 21044 NORDHOFF STREET, SUITE M C/O FIRST CHOICE MANAGEMENT CHATSWORTH, CA 91311	Mailing Address 21044 NORDHOFF STREET, SUITE M C/O FIRST CHOICE MANAGEMENT CHATSWORTH, CA 91311
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20003544



2. Principal Place of Business 9035 Eton Ave Suite, Apt. #, etc. A	3. Mailing Address 9035 Eton Ave Suite, Apt. #, etc. A
City & State Canoga Park Calif	City & State Canoga Park CA
Zip 91304	Country 91304

01142005 Chg-LLC CR2E083 (10/03)

4. FEI Number 35-2242912	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent RICHARD J. ALAN CAHAN 121 ALHAMBRA PLAZA C/O BECKER & POLIAKOFF, P.A. CORAL GABLES, FL 33134	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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	MGR CAMMARATA, KEVIN 21044 NORDHOFF STREET, SUITE M CHATSWORTH, CA 91311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9035 Eton Ave *A Canoga Park, CA 91304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAMMARATA, PAOLO 10120 S. EASTERN AVENUE, SUITE 218 HENDERSON, NV 89052 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9035 Eton Ave *A Canoga Park, CA 91304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Rosanna Cammarata* **1-15-05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE manager Date Daytime Phone #