

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2005 8:00 am
Secretary of State

03-28-2005 90290 003 ****50.00

DOCUMENT # L04000074882 1. Entity Name STEADFAST, LLC					
Principal Place of Business 7224 YARDLEY WAY TAMPA, FL 33647-7224			Mailing Address P.O. BOX 47684 TAMPA, FL 33647		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address 7224 Yardley Way Suite, Apt. #, etc.		
City & State Tampa FL			City & State Tampa FL		
Zip 33647		Country		Zip 33647	
Country		4. FEJ Number 14-1919079			
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent DICKERSON LAW FIRM, P.A. 2020 W BRANDON BLVD. SUITE 206 BRANDON, FL 33511				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 _____ (NOTE: Registered Agent signature required when re-registering) 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	MGRM LOOI, KENNETH S 16606 PALM ROYAL DRIVE, APT. # 1117 TAMPA, FL 33647	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOOI, CLAUDIA W 16606 PALM ROYAL DRIVE, APT. # 1117 TAMPA, FL 33647	☐ Delete			
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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: <u>Kenneth Looi</u> 3/16/05.					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

3F006141



03152005 Chg-LLC CR2E083 (10/03)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

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SIGNATURE: Kenneth Looi 3/16/05.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

May 08, 2005

attachment
30066121



Reference Number : L04000074882

I have entered the FEI number
and my mailing address is

7224 Gardley way

Tampa FL 33647

If you have any questions please call
813 866 4848 .

Thank you .

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