2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (~~AR~~)

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FILED
Apr 11, 2005 8:00 am
Secretary of State
03-02-2005 90016 022 ****50.00

DOCUMENT # L04000091847

1. Entity Name
TWINS INVESTMENT GROUP LLC

Principal Place of Business	Mailing Address
1007 NO. FEDERAL HIGHWAY SUITE 123 FORT LAUDERDALE, FL 33304	1007 NO. FEDERAL HIGHWAY SUITE 123 FORT LAUDERDALE, FL 33304

30003227

2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E083 (10/04)

4. FEI Number 20-2634919 ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DANZIGER, JANICE
1007 NO. FEDERAL HIGHWAY
SUITE 123
FORT LAUDERDALE FL 33304

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 Janice [signature] Janice Danziger 2-21-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	~~MGRM DANZIGER, JANICE 1007 NO. FEDERAL HIGHWAY, NO. 123 FORT LAUDERDALE FL 33304~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DANZIGER JANICE 2516 N.E. 26th AVE Ft. LAUD FL 33305 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: Janice [signature] Janice Danziger 2/21/05 954-523-1052
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER/MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #