

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000024

FILED
May 04, 2004
Secretary of State

Entity Name: GUSTO MARKETING SERVICES, LLC

Current Principal Place of Business:

5400 SOUTH UNIVERSITY DR
STE 111
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

5400 SOUTH UNIVERSITY DR
STE 111
DAVIE, FL 33328

New Mailing Address:

FEI Number: 65-0544729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LODISH, ALVIN D P.A.
200 S. BISCAYNE BLVD., STE #2500
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HASKEW, JON L
5400 SOUTH UNIVERSITY DRIVE
SUITE 111
DAVIE, FL 33328 US

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: JON L. HASKEW

05/04/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ELRAD, MARTIN H
Address: 6937 LAKE ESTATE CT
City-St-Zip: BOCA RATON, FL 33496

Title: MGR () Delete
Name: POTIKER, LOWELL
Address: 3366 NORTH TORREY PINES CT, STE 210
City-St-Zip: LA JOLLA, CA 92037

Title: MGR () Delete
Name: HASKEW, LES
Address: 5400 S. UNIVERSITY DRIVE SUITE 111
City-St-Zip: DAVIE, FL 33328 US

Title: MGR (X) Delete
Name: RICHTER, DAVID
Address: 227 W. MONROE STREET, SUITE 4800
City-St-Zip: CHICAGO, IL 606065018

Title: MGR () Delete
Name: GLENN, STEVEN
Address: 2211 NORFOLK, SUITE 1060
City-St-Zip: HOUSTON, TX 77098 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: HASKEW, JON L COO
Address: 5400 S. UNIVERSITY DRIVE SUITE 111
City-St-Zip: DAVIE, FL 33328 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: GLENN, STEVEN PRES
Address: 2211 NORFOLK, SUITE 1060
City-St-Zip: HOUSTON, TX 77098 US

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: JON L. HASKEW

COO

05/04/2004

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