


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L96000000300
 1. Entity Name
HOFFMAN, LEVY & ASSOCIATES, C.P.A.'S, L.C.



Principal Place of Business 2525 N STATE RD 7 SUITE 215 HOLLYWOOD, FL 33021	Mailing Address 2525 N STATE RD 7 SUITE 215 HOLLYWOOD, FL 33021
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DO NOT WRITE IN THIS SPACE



04092004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0658539	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 LEVY, STEVEN Z
 2525 N STATE RD 7
 SUITE 215
 HOLLYWOOD, FL 33021

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2004**

04/12/04-80097-001 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HOFFMAN, SHELDON A 2525 N STATE RD 7 #215 HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LEVY, STEVEN Z 2525 N STATE RD 7 #215 HOLLYWOOD, FL 33021
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: Sheldon A. Hoffman **4/10/04** **981-966-1141**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #