2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L9600000529

1. Entity Name MIKIE'S WORLD, L.C.



Principal Place of Business

%ANTHONY M PISANI 3199A LAKE WORTH RD LAKE WORTH, FL 33461 Mailing Address

%ANTHONY M PISANI 3199A LAKE WORTH RD LAKE WORTH, FL 33461

FILED May 03, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPR

04282004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-0667646 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

5. Name and Address of Current Registered Agent

PISANI, ANTHONY M 3199A LAKE WORTH RD LAKE WORTH, FL 33461

DO NOT WRITE IN THIS SPACE

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	Signature, typed or printed name of registered agent and little if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			0(:147915 94-80126-007 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PISANI, ANTHONY M 3199A LAKE WORTH RD LAKE WORTH, FL 33461		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS GITY-ST-ZIP		DO NOT V	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	SPACE
TITLE NAME STREET ADDRESS CTY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing aces 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 timited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			