

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000001348

Entity Name: SFAX, LLC

FILED  
Jan 12, 2005  
Secretary of State

**Current Principal Place of Business:**

1235 EUCLID AVENUE  
MIAMI, FL 33179

**New Principal Place of Business:**

2180 POND VIEW CT.  
RESTON, VA 20191

**Current Mailing Address:**

2180 POND VIEW COURT  
RESTON, VA 20191

**New Mailing Address:**

FEI Number: 58-2356850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323010000 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: REGIGNANO, MICHEL  
Address: 2180 POND VIEW COURT  
City-St-Zip: RESTON, VA 20191

Title: MGR ( ) Delete  
Name: Z-RECON, INC.,  
Address: 2181 POND VIEW COURT  
City-St-Zip: RESTON, VA 20191

**ADDITIONS/CHANGES:**

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

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

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: MICHEL REGIGNANO

MEMB

01/12/2005

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