

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000001401

Entity Name: DREW INVESTMENT L.C.

FILED
Aug 26, 2004
Secretary of State

Current Principal Place of Business:

1840 N.E. 19 DRIVE
APT 6
NORTH MIAMI, FL 33181

Current Mailing Address:

1840 N.E. 19 DRIVE
APT 6
NORTH MIAMI, FL 33181

New Principal Place of Business:

11855 N.E. 19TH DR.
OFFICE
NORTH MIAMI, FL 33181

New Mailing Address:

POB 040331
BROOKLYN, NY 11204

FEI Number: 65-0785165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLEIN, TED
88 N.E. 168 STREET
NORTH MIAMI BEACH, FL 33162 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: MBR () Delete
Name: GANDHI, MAHESH
Address: 4000 HOLLYWOOD BLVD., SUITE 350
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Delete
Name: FILLER, ARLINGTON
Address: 4000 HOLLYWOOD BLVD., SUITE 350
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GUTMAN, JOSEPH
Address: 11855 N.E. 19TH DR.
City-St-Zip: NORTH MIAMI, FL 33181

Title: MGR (X) Change () Addition
Name: SCHLOSS, MIKE
Address: 11855 N.E. 19TH DR.
City-St-Zip: NORTH MIAMI, FL 33181

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: JOSEPH GUTMAN

MGRM

08/26/2004

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