2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L97000001419

1. Entity Name
PHA INVESTMENTS, L.C.

Principal Place of Business	Mailing Address
11274 W. HILLSBOROUGH AVE TAMPA, FL 33635	PO BOX 25437 TAMPA, FL 33623

DO NOT WRITE IN THIS SPACE

FILED

04 APR 14 AM 11: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

$50.00

04052004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
59-3483090	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SALAS, RICARDO A
11274 W. HILLSBOROUGH AVE.
TAMPA, FL 33635

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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 _____

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

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SALAS, RICARDO
STREET ADDRESS	11274 W. HILLSBOROUGH AVE
CITY-ST-ZIP	TAMPA, FL 33635
TITLE	MGR
NAME	FERRELLI, RICHARD
STREET ADDRESS	11274 W. HILLSBOROUGH AVE
CITY-ST-ZIP	TAMPA, FL 33635
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: _____ 3/5/04 913-220-1161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #