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2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L98000000961

1. Entity Name

NAZARI ASSOCIATES, LLC



FILED
Jan 12, 2004-08:00 AM
Secretary of State

Principal Place of Business

3500 N. 55TH AVENUE HOLLYWOOD, FL 33021

Mailing Address

3500 N. 55TH AVENUE HOLLYWOOD, FL 33021



DO NOT WRITE IN THIS SPACE

01062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-0856853 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SARAGOVIA, EFRAIM 3500 N. 55TH AVENUE HOLLYWOOD, FL 33021

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.			
OIGHAN (ONE.	Signature, typod or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when remetating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2004	37. 49.	
9.	MANAGING MEMBERS/MANAGERS		
THTLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SARAGOVIA, EFRAIM 3500 N. 55TH AVENUE HOLLYWOOD, FL 33021	017	U00000003529 13/U4-80060-023 50.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes. I further certify that the information indicated on this report is interested 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 808, Florida Statutes.

SIGNATURE: _

d or printed name of skining managing member, or authorized representative

1/0/04

954 929-1123

Date

Daytime Phone #