## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT #1 98000002622



## FILED May 05, 2004 8:00 am Secretary of State

MAMI, FL 33176	t. Entity Name FLORIDA DIA	AGNOSTIC ASSOCIATI	ES, L.L.C.				05-05-2004	_	005 ****	50.00
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   O4282004   Chg-LLC   CR2E683 (10/03)		DRIVE	8700 N. KENDALL DRIV Suite 212	/E	•		L COTON LEXIN ÉRUM AUTOR ÉRAN	: 80m 0018 116	TO CHAR HOUSE	
City & Signts  City & State  Country  Country  Country  Country  Country  S. Country  S. Country  S. Cartificate of Satus Desired   Februard	2. Principal Place	of Business	3. Mailing Address	3. Mailing Address						
Space   Spac	Suite, Apt. #, etc	0.	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	04282004	Chg-LLC	CR2E0	83 (10/03)	
Zip Country	City & State		City & State							
Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered agent.  ICHATURE  Filting Fee its \$50.00  Due by May 1, 2004  Make checks psysible to Florids Oppartment of State  MANAGING MEMBERS/MANAGERS  ITIL  MAR HOUTEN, SUSAN  11443 KEY DEER CR.  MANAGING MEMBERS/MANAGERS  ITIL  MAR HOUTEN, SUSAN  11443 KEY DEER CR.  MANAGING MEMBERS (MANAGERS  ITIL  MAR HOUTEN, SUSAN  11443 KEY DEER CR.  MANAGING MEMBERS (MANAGERS  ITIL  MAR HOUTEN, SUSAN  11443 KEY DEER CR.  MANAGING MEMBERS (MANAGERS  ITIL  MAR HOUTEN, SUSAN  11543 KEY DEER CR.  MANAGING MEMBERS (MANAGERS  ITIL  MAR HOUTEN, SUSAN  11643 KEY DEER CR.  MANAGING MARIA  12221 S.W. 120TH AVE.  MANAGING MEMBERS (MANAGERS  ITIL  MAR HOUTEN, SUSAN  1175-129  Delete TITL  MAR HOUTEN, SUSAN  1175-129	Zip	Country	Ζip	Coun	try	<u> </u>			\$5.00 Add	ditional
Name Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Cod	6.	. Name and Address of Current	Registered Agent			7. Name and	Address of New R	·		
City FL Zip Code  The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  GRATURE  Speaker, liped or printed name of registered agent and site if applicatels.  PUTE Filting Fice is \$50,000  Due by May 1, 2004  Macke check payable to Florida Department of State  MANAGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES  TITLE  MANA HOUTEN, SUSAN  NAME  SIREI ADDRESS  CITY-ST-2P  MANA HAS KEY DEER CR.  LY-ST-2P  MANAM, FL 33186  TITLE  MAR PARDINAS, MARIA  PARDINAS, M	01 ALHAMBŘ SUITE 601	RA CIRCLE				(P.O. Box Numb	er is Not Acceptable	)		
The obligations of registered agent.    Comment   Commen	CORAL GABL	ES, FL 33134	,	İ	City			FL	Zip Cod	le
Filting Fee is \$50.00 Due by Misry 1, 2004    Make check payable to Provide Department of State   Managing Members / Managers   10.   ADDITIONS / Change   Addition			or the purpose of changing its	registere	ed office or registe	red agent, or bo	th, in the State of Flo	rida. I am f	amiliar with,	and accept
Disse by May 1, 2004    Managing Members/Managers   10.   ADDITIONS/CHANGES	IGNATURE	ture, typed or printed name of registered agent	and title if applicable. (NOTI	: Registere	d Agent signature require	d when reinstating)		DATE		<del></del>
MANAGING MEMBERS/MANAGERS  TILE  MARE  VAN HOUTEN, SUSAN  TIRET ADDRESS  TIT'-S1-2P  TILE  MARE  FIELD STONE, RONALD R  201 ALHAMBRA CIRCLE, SUITE 601  CORAL GABLES, FL 33134  CORAL GABLES, FL 33134  CORAL GABLES, FL 33134  TILE  MARE	Filing Oue b	Fee is \$50.00 by May 1, 2004					Florida	Departm	ent of Stat	9
MARE INTERET ADDRESS ITT'S 1-2P  TITLE INT'S 1-2P  MGR  MGR  PARDINAS, MARIA 12221 S.W. 120TH AVE. ITTLE INAME INTERET ADDRESS ITT'S 1-2P  TITLE INAME INTERET ADDRESS INT'S 1-2P  TITLE INAME INAME INTERET ADDRESS INT'S 1-2P  TITLE INAME INTERET ADDRESS INT'S 1-2P  TITLE INAME INTERET ADDRESS INT'S 1-2P  TITLE INAME INAME INTERET ADDRESS INT'S 1-2P  TITLE INAME INTERET ADDRESS INT'S		MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES	20 944 PAR CONTRACTOR	41.2.4.4.4.4. CO.J.A. 100.0.
MGR   Delete   TITLE   MAME   Change   Addition   MAME   M	AME VA	N HOUTEN, SUSAN	Delete	NAM	Ε		•	- <u>-</u>	Change	Addition
PARDINAS, MARIA IREET ADDRESS ITY-ST-ZIP  MIAMI, FL 33188  CITY-ST-ZIP  MIAMI, FL 33188  CITY-ST-ZIP  MIAMI, FL 33188  CITY-ST-ZIP  MIAMI, FL 33188  CITY-ST-ZIP  CORAL GABLES, FL 33134  CORAL GABLES, FL 34131  CORAL GABLES		<del></del>		-		<del></del>	<del> </del>		CI (h	C Addition
MGRM FIELDSTONE, RONALD R : NAME   TREET ADDRESS   CORAL GABLES, FL 33134   Change   Addition   Addition   Change   Addition   Change   Addition   Addition   Change   Addition   Addition   Addition   Change   Addition	AME PA TREET ADDRESS 122	RDINAS, MARIA 221 S.W. 120TH AVE.	C.J. Delete	NAM Stre	E Et adoress				Change	L. Addition
ANKE ANKE ANKE ANKE ANKE ANKE ANKE ANKE	TILE MG AME FIE TREET ADDRESS 20	GRM ELDSTONE, RONALD R 1 ALHAMBRA CIRCLE, SUITI		nam Stre	E ET ADORESS				Change	☐ Addition
MAME STREET ADDRESS STREET ADDRESS STY-ST-ZIP  TILE Delete TITLE NAME STREET ADDRESS	IAME TREET ADDRESS		☐ Delete	NAM STRE	E ET ADORESS				☐ Change	☐ Addition
MANE TREET ADDRESS STREET ADDRESS NTY-ST-ZIP CITY-ST-ZIP	IAME STREET ADDRESS		☐ Detete	NAM Stre	ET ADORESS				Change	Addition
11. I hereby certify that the information supplied with this filing desa not equify for the exemption stated in Section 119.07(3)(j), 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.	IAME STREET ADORESS		☐ Delete	NAM STRE	E EET ADDRESS				☐ Change	☐ Addition
	<ol> <li>I hereby certify indicated on the limited liability</li> </ol>	y that the information supplied wit his report is true and accurate and company or the receiver or trusts	h this filing does not qualify to d that my signature shall have se empowered to execute this	r the exe the sam report as	imption stated in S e legal effect as if s required by Char	ection 119.07(3) made under oat oter 608, Florida	(i), Florida Statutes. n; that I am a manag Statutes.	I further cer ging membe	tify that the i er or manag	information er of the