2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: LEGAL JOY FOR JETY FOR SIGNATURE AND TYPED OFFINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED May 02, 2005 08:00 AM Secretary of State

Daytime Phone #

1. Entity Nam	MENT # L98000002844 isan, l.l.c.		Secretary of State
Principal Plac 2420 N.E. 2 LIGHTHOUSE			T STANGASI AND SOUS LOVE DAILY WAND WAND WAS IN MASTER SOUND WANT AND AND A THREE PARTY.
DO NOT WRITE IN THIS SPACE			04262005 No Chg-LLC
6. Name and Address of Current Registered Agent JERRY ISAN 2420 N.E. 27TH STREET LIGHTHOUSE POINT, FL 33064			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 Signature, typed or printed name of registered agent and tible if applicable (NOTE Registered Agent signature required when reinstating) PATE			
Filing Fee is \$50.00 Due by May 1, 2005			
9. TITLE	MANAGING MEMBERS/MANAGERS MGRM		
NAME STREET ADDRESS CITY-ST-ZIP	ISAN, JERRY 2420 N.E. 27TH STREET LIGHTHOUSE POINT, FL 33064		linnninossa779
TITLE NAME STREET ADDRESS GITY-ST-ZIP			U00000358779 05/04/05-80128-007 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP	_		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	<u>- 7 - 1-17 - 1, 11</u>	· <u> </u>
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), Florida Statutes, I further certify that the information incicated 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.			