


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000002901
 1. Entity Name
 SRMB, L.C.



Principal Place of Business 7380 S.W. 122 STREET MIAMI, FL 33156	Mailing Address 7957 NW 54 ST. MIAMI, FL 33156
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01282004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0893571	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 RAZZAGHI-AWAL, AMIR
 7380 S.W. 122 STREET
 MIAMI, FL 33156

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

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RAZZAGHI-AWAL, AMIR 7380 S.W. 122 STREET MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MAZOR, DAVID 9980 S.W. 130 STREET MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SADEGHI, ALI 15455 S.W. 82ND COURT MIAMI, FL 33157
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 02/27/04-80059-011 50.00

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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)(f), 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: David Mazor **DAVID MAZOR** 3/23/04 305-471-2213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #