

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000003333

Entity Name: 1-888-WATCHES, L.L.C.

FILED
Jun 02, 2004
Secretary of State

Current Principal Place of Business:

14001 NW 4TH ST
SUNRISE, FL 33325

New Principal Place of Business:

Current Mailing Address:

14001 NW 4TH ST
SUNRISE, FL 33325

New Mailing Address:

FEI Number: 48-4943438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA LLC
100 SE 2ND ST
SUITE 3500
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

REGISTERED AGENTS OF FLORIDA LLC
100 SE 2ND ST
SUITE 2900
MIAMI, FL 33131 US

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.

SIGNATURE: CHARLES J. RENNERT, VICE PRESIDENT

06/02/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: LIPTON, ALAN
Address: 14001 NW 4TH ST
City-St-Zip: SUNRISE, FL 33325

Title: MGR () Delete
Name: KORNBLUM, JEFFREY
Address: 14001 NW 4TH ST
City-St-Zip: SUNRISE, FL 33325

Title: MGR () Delete
Name: KORNBLUM, AMERISA
Address: 14001 NW 4TH ST
City-St-Zip: SUNRISE, FL 33325

Title: MGR () Delete
Name: ARRASCAETA, GRACE
Address: 14001 NW 4TH ST
City-St-Zip: SUNRISE, FL 33325

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: GRACE ARRASCAETA

MGR

06/02/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date