


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L99000002088 1. Entity Name E HOLDINGS, LLC	
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Principal Place of Business 10441 ALTA ROAD JACKSONVILLE, FL 32226	Mailing Address 10441 ALTA ROAD JACKSONVILLE, FL 32226
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DO NOT WRITE IN THIS SPACE



01172005 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 59-3570741	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HAKIMIAN, BENJAMIN S  
10441 ALTA ROAD  
JACKSONVILLE, FL 32226

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

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HAKIMIAN, BENJAMIN S 10441 ALTA ROAD JACKSONVILLE, FL 32226
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04/27/05-80151-003 50.00

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:** \_\_\_\_\_      4-25-2005      904-753-4093  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #