

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002911

FILED
Jan 10, 2004
Secretary of State

Entity Name: URIP INVESTMENTS LLC

Current Principal Place of Business:

5821 N. ANDREWS WAY
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

400 FAIRWAY DRIVE SUITE 102
DEERFIELD BEACH, FL 33441

Current Mailing Address:

5821 N. ANDREWS WAY
FORT LAUDERDALE, FL 33309

New Mailing Address:

400 FAIRWAY DRIVE SUITE 102
DEERFIELD BEACH, FL 33441

FEI Number: 65-0920007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 SOUTH BISCAYNE BOULEVARD, SUITE 1500
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: BERCH, MARK
Address: 5821 N. ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR () Delete
Name: BERCH, IAN
Address: 5821 N. ANDREWS WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BERCH, MARK
Address: 400 FAIRWAY DRIVE SUITE 102
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR (X) Change () Addition
Name: BERCH, IAN
Address: 400 FAIRWAY DRIVE SUITE 102
City-St-Zip: DEERFIELD BEACH, FL 33441

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: MARK BERCH

PRES

01/10/2004

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