## 2004 LIMITED LIABILITY COMPANY

## ANNUAL REPORT Mar 17, 2004 08:00 AM Secretary of State DOCUMENT # L99000005826` KINGS AMBASSADOR, L.L.C. Principal Place of Business Mailing Address 825 PARKWAY ST., SUITE 4 825 PARKWAY ST., SUITE 4 JUPITER, FL 33477 JUPITER, FL 33477 03122004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3598580 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIELDSTONE, RONALD R DO NOT WRITE 200 SOUTH BISCAYNE BLVD STE 2100 IN THIS SPACE MIAMI, FL 33131 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 title if applicable (NOTE, Registered Agent signature required when reinstating) 0000000091217 Filing Fee is \$50.00 Due by May 1, 2004 03/17/04-80049-024 50.00 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME LUBECK, JOSEPH G STREET ADDRESS 825 PARKWAY ST., SUITE 4 CITY-ST-ZIP JUPITER, FL 33477 1834 NAME STREET ADDRESS CITY-ST-ZIP TRUE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IRLE IN THIS SPACE NAME STREET ABORESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(i), 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 of the receiver or trustoe empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CRY-SI-ZIP IIIŒ

STREET ADDRESS CTTY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED**