

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L99000006559**

1. Entity Name  
**ACCOUNT MANAGEMENT, LLC**



Principal Place of Business  
**1015 10TH STREET  
LAKE PARK, FL 33403**

Mailing Address  
**1015 10TH STREET  
LAKE PARK, FL 33403**

**DO NOT WRITE IN THIS SPACE**



03192004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**65-0956952**

Applied  
Not App

5. Certificate of Status Desired ☐

**\$5.00** Addition.  
Fee Required

**6. Name and Address of Current Registered Agent**

**BAKER-HUGHES, ROCHELLE  
1015 10TH STREET  
LAKE PARK, FL 33403**

**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 am 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)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGR<br>OLIVEIRA, ADRIANA<br>1015 10TH STREET<br>LAKE PARK, FL 33403 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

000000116955  
04/16/04-80086-010 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: *Adriana*