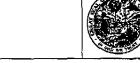
2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOC	UMEN	JT # [99000	വവദ	617

1. Entity Name

WEST MIAMI TELECOM LLC



Principal Place of Business

8750 N.W. 21ST TERRACE MIAMI, FL 33172 Mailing Address

16 EAST 48TH STREET 5TH FLOOR NEW YORK, NY 10017





07062004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 13-4194265 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HORNSTEIN, BRUCE ESQ. 317 - 71ST STREET MIAMI BEACH, FL 33141



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		\ \ \ \ \	
	named entity submits this statement for the purpose of chan tions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signatura, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent algoriture required when reinstelling)	9TAQ
Fil Due l	ling Fee is \$50,00 by September 8, 2004		900038833469
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HAKIM, KAMRAN 425 E. 61ST STREET, 5TH FL NEW YORK, NY 10021		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	il n		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			-

11. I hereby certify that the information supplied with this filling 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 each; 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:

NAME STREET ADDRESS CITY-ST-2IP

BRUCE HOR-iteM, authored eep/Reyichel Agent

7-6-04

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REFERENCE

793149

6594A

AUTHORIZATION

COST LIMIT

ORDER DATE: July 7, 2004

ORDER TIME: 11:58 AM

ORDER NO. : 793149-010

CUSTOMER NO:

6594A

CUSTOMER: Ms. Patricia Gonzalez

Green Kahn & Piotrkowski, Pa

317 71st Street

Miami Beach, FL 33141

ANNUAL REPORT FILING

NAME: WEST MIAMI TELECOM LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#2935

EXAMINER'S INITIALS: