


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # M00000001894 1. Entity Name PHOENIX VENTURES GROUP, LLC	
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Principal Place of Business 1945 ALOMA AVE WINTER PARK, FL 32792	Mailing Address 1945 ALOMA AVE WINTER PARK, FL 32792
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DO NOT WRITE IN THIS SPACE



04252004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 91-2069178	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HAMILLA, MIKE 6955 HANGING MOSS RD., SUITE 106 ORLAND, FL 32807

**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 _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITE EALE TRUST PO BOX 700155 ORLANDO, FL 32878
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DIAZ, ARELA 1479 MARSHALL ST. NY, NY 11003
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04/28/04-80046-011 50.00

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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: White Eagle Trust 4/15/2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #