


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 04, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M01000001188</b> 1. Entity Name JAVA TIME FLORIDA LLC	
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Principal Place of Business 5441 NW 15TH STREET BAY #5 MARGATE, FL 33063	Mailing Address 378 UNIVERSITY AVE WESTWOOD, MA 02090
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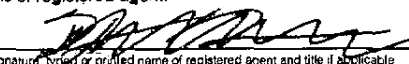
02282005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 06-1618471	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  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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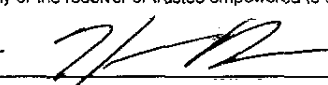
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  (NOTE: Registered Agent signature required when reinstating)	DATE <u>3/30/05</u>

**Filing Fee is \$50.00  
Due by May 1, 2005**

U00000286096  
04/04/05-80097-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COHEN, ROGER 378 UNIVERSITY AVE WESTWOOD, MA 02090
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KEEFE, PAUL 5441 NW 15TH ST, BAY #5 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HOLLORAN, EDWARD 378 UNIVERSITY AVE WESTWOOD, MA 02090
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	DATE <u>3/30/05</u> (701) 466-0734 Daytime Phone #