2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FILED Jan 31, 2005 08:00 AM Secretary of State

		HE ILLI OILL		Secretary of Stat	tο
1. Entity Nam	MENT # M02000			Secretary or Star	iC
1	es of Business INTRAL EXPRESSWAY 75243 US	Mailing Address 12801 N. CENTRAL EXPRESS SUITE 700 DALLAS, TX 75243 US	SWAY	TO SECURE A SURFICIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DELIGIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DE	
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DO NOT WRITE IN THIS SPACE			01102005No Chg-LLC CR2E083 (10/03)		
· ·		·OL	4. FEI Number Applied For 75-2947806 Not Applied		
				5. Certificate of Status Desired Status Desired Fee Required	
	6. Name and Address of Cu	rent Registered Agent		Lee Ustimiso	
CORPORA	ATION SERVICE COMPAN	1 Y		DO NOT MOITE	
1201 HAY	1 HAYS STREET LAHASSEE, FL 32301-2525			DO NOT WRITE	
I ALLANDA	305E, FL 32301-2323	· · · · · · · · · · · · · · · · · · ·	}	IN THIS SPACE	
8. The above	named entity submits this statem tions of registered agent.	ent for the purpose of changing its regist	ered office or register	red agent, or both, in the State of Florida. I am familiar with, and acce	pt
SIGNATURE.	Signature, typed or printed name of registered	agoni and title if applicable. (NOTE: Regist	ared Agent signature required	d when reinstaling) DATE	
F	iling Fee is \$50.00 ue by May 1, 2005	e de la maria de la	•		
9.	MANAGING M	MBÉRS/MANAGERS			
TITLE	MGRM ADVANCE PROCESSING S	Vertexe INO			
STREET ADDRESS	12801 N. CENTRAL EXPW		4	1/00000206815 02/01/05-80021-008 50.00	
CITY-ST-ZIP	DALLAS, TX 75243	 	_]	02/01/05-80021-088 50:00	
TITLE NAME			}	. .	
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CITY-ST-ZIP			4		
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NAME STREET ADDRESS					

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 turther certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee approved to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE:

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

Daytime Phone of Desylman Phone of Des