

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000000582

**FILED**  
**Mar 18, 2004**  
**Secretary of State**

**Entity Name:** OLIO ABSTRACT LLC

**Current Principal Place of Business:**

4598 NW 26TH AVE  
BOCA RATON, FL 334342518

**New Principal Place of Business:**

**Current Mailing Address:**

4598 NW 26TH AVE  
BOCA RATON, FL 334342518

**New Mailing Address:**

**FEI Number:** 56-2340374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAPODILUPO, FRANCIS  
4598 NW 26TH AVE  
BOCA RATON, FL 334342518

**Name and Address of New Registered Agent:**

CAPODILUPO, FRANCIS A  
4598 NW 26TH AVE  
BOCA RATON, FL 334342518

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.

SIGNATURE: FRANCIS A. CAPODILUPO

03/18/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: CAPODILUPO, FRANCIS  
Address: 4598 NW 26TH AVE  
City-St-Zip: BOCA RATON, FL 334342518

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: FRANCIS CAPODILUPO

MGR

03/18/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date