

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # M03000002526		
1. Entity Name ANM FUNDING LLC		
Principal Place of Business 4203 13TH AVENUE BROOKLYN, NY 11219	Mailing Address 4203 13TH AVENUE BROOKLYN, NY 11219	



07062004 No Chg-LLC CR2E053 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3661852	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BLANCHARD, DOMINIQUE 7904 WEST DR. UNIT 801 NORTHBAY VILLAGE, FL 33141
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**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 this State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature: Typed or printed name of registered agent and title, if applicable. (NOT: Registered agent signature required when re-appointing)

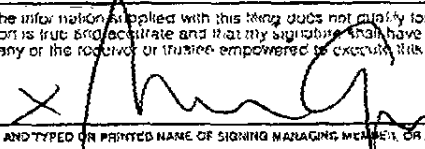
**Filing Fee is \$50.00
Due by September 8, 2004**

000000166976
07/19/04-800006-006 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GROSS, MOSES 4203 13TH AVENUE BROOKLYN, NY 11219
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 806, Florida Statutes.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

7/19/04

Daytime Phone: 0