

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90290 001 ****50.00

DOCUMENT # M03000004217

1. Entity Name
YOUR EYE IN THE SKY LLC



Principal Place of Business
**280 DORCHESTER RD
GARDEN CITY, NY 11530**

Mailing Address
**280 DORCHESTER RD
GARDEN CITY, NY 11530**

DO NOT WRITE IN THIS SPACE



02202004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**O'DIerna, Robert Jr
2741 NE 46 ST
LIGHTHOUSE POINTE, FL 33064**

**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

ROBERT O'DIERNA JR.

2/29/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	Di Bella, Richard
STREET ADDRESS	280 DORCHESTER RD
CITY-ST-ZIP	GARDEN CITY, NY 11530
TITLE	MGRM
NAME	O'DIERNA, ROBERT JR
STREET ADDRESS	280 DORCHESTER RD
CITY-ST-ZIP	GARDEN CITY, NY 11530
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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)(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:

ROBERT O'DIERNA JR.

2/29/04

866-421-2288

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

Date

Daytime Phone #