


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M04000004944 1. Entity Name POWERMINN 9090 LR4, LLC	
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 MAR 23 PM 3:00

Principal Place of Business 2295 CORPORATE BLVD., N.W., SUITE 222 BOCA RATON, FL 33431	Mailing Address 2295 CORPORATE BLVD., N.W., SUITE 222 BOCA RATON, FL 33431
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01062005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1831615	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SALIPA ENTERPRISES, INC. 20 COMMUNITY PLACE MORRISTOWN, NJ 07960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/09/05--01011--003 **275.00

**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: *[Signature]* UP 3/22/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #