


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M98000000027</b> 1. Entity Name <b>ALTEO GROUP LLC</b>	
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Principal Place of Business <b>3008 NORTHWEST 29TH AVENUE BOCA RATON, FL 33434</b>	Mailing Address <b>3008 NORTHWEST 29TH AVENUE BOCA RATON, FL 33434</b>
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01062004 No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0801420</b>	Applied For <b>Not Applicable</b>
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**THOMAS, ROBERT L JR.  
3008 NORTHWEST 29TH AVE.  
BOCA RATON, FL 33434**

**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 \_\_\_\_\_

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**

1100000100829  
04/01/04-80023-013 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR THOMAS, ROBERT L 3008 NW 29TH AVE. BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR THOMAS, CYNTHIA L 3008 NW 29TH AVE. BOCA RATON, FL 33434
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**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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*Robert L. Thomas Jr* **Robert L. Thomas Jr** 3/28/04