2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

FILED Mar 23, 2005 08:00 AM Secretary of State

			Sagratary of Stat
1. Entity Nar	MENT # M9800000027 GROUP LLC		Secretary of Stat
Principal Place of Business 3008 NORTHWEST 29TH ÄVENUE BOCA RATON, FL 33434 BOCA RATON, FL 33434 Mailing Address 3008 NORTHWEST 29TH AVENUE BOCA RATON, FL 33434)
DO NOT WRITE IN THIS SPAC		CE	03202005 No Chg-LLC
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 tride if applicable (NOTE Registored Agent signature required when reinstating).			
Filing Fee is \$50.00 Due by May 1, 2005			000000273802 03/23/05-80043-003 50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THOMAS, RÖBERT L 3008 NW 29TH AVE. BOCA RATON, FL 33434 MGR THOMAS, CYNTHIA L 3008 NW 29TH AVE. BOCA RATON, FL 33434		DO NOT WRITE IN THIS SPACE
11. Thereby 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 eath; 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			

20/05

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Daytime Phone #