2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013726

Entity Name: ENTA INVESTMENTS LLC

CLEARWATER, FL 33756 US

City-St-Zip:

FILED Apr 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1330 SOUTH FORT HARRISON AVE. CLEARWATER, FL 33756 **Current Mailing Address: New Mailing Address:** 1330 SOUTH FORT HARRISON AVE. CLEARWATER, FL 33756 FEI Number: 20-0074658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CANTU, DAVID O 25400 ÚS 19 NORTH SUITE 116 CLEARWATER, FL 33763 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ALIDINA, ARIF A MD Name: Name: 1330 SOUTH FORT HARRISON AVE Address: Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition ANTHONY, STEVEN L DO Name: Name: Address: 1330 SOUTH FORT HARRISON AVE Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition BARNA, JAMES S MD Name: Name: 1330 SOUTH FORT HARRISON AVE Address: Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: COHEN, LANCE M MD Name: Address: 1330 SOUTH FORT HARRISON AVE Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition MILLER, MICHELL B MD Name: Name: 1330 SOUTH FORT HARRISON AVE Address: Address: City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: Title: () Delete Title: () Change () Addition STEINIGER, JOSEPH R MD Name: Name: Address: 1330 SOUTH FORT HARRISON AVE Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: MICHAEL FRANKS MR 04/02/2008