2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057918

Entity Name: SAMANDA ONE LLC

FILED Jan 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4986 SE LOST LAKE WAY HOBE SOUND, FL 33455 US

Current Mailing Address: New Mailing Address:

P.O. BOX 3087

TEQUESTA, FL 33469 US

FEI Number: 20-1975710 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:

D'ALESSIO, NICHOLAS JR. 4986 SE LOST LAKE WAY HOBE SOUND, FL 33455 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: MGRM () Delete Title: () Change () Addition

 Name:
 HELPER, DENNIS F JR.
 Name:

 Address:
 17648 CINQUEZ PARK RD. W
 Address:

 City-St-Zip:
 JUPITER, FL 33458 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 D'ALESSIO, NICHOLAS JR.
 Name:

 Address:
 4986 SE LOST LAKE WAY
 Address:

 City-St-Zip:
 HOBE SOUND, FL 33455 US
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 HELPER, DENNIS F
 Name:

 Address:
 25 ELEUTHERA DRIVE
 Address:

 City-St-Zip:
 OCEAN RIDGE, FL 33435 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: DENNIS HELPER MGRM 01/23/2006