2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 28, 2008 08:00 AN Secretary of State DOCUMENT # L06000069692 1. Entity Name SPECIALTY SOAP COMPANY, L.L.C. Principal Place of Business Mailing Address 204 37TH AVENUE NORTH #100 204 37TH AVENUE NORTH #100 ST. PETERSBURG, FL 33704 ST. PETERSBURG, FL 33704 04162008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5216347 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEWAN, THOMAS E DO NOT WRITE **204 37TH AVENUE NORTH #100** ST. PETERSBURG, FL 33704IN 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 regulatered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWI!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS TITLE MGR NAME DEWAN, DEAN A 204 37TH AVENUE NORTH #100 STREET ADDRESS TU000000927161 *** **** CITY-ST-ZIP ST. PETERSBURG, FL 33704 05/20/08-80096-001 138.75 MGR TITLE NAME DEWAN, THOMAS E STREET ADDRESS 204 37TH AVENUE NORTH #100 CITY-ST-ZIP ST. PETERSBURG, FL 33704 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

4-16-08

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