2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053750

P.O. BOX 780988

ORLANDO, FL 32878

Name:

Address:

City-St-Zip:

Entity Name: FL-MAN SPORTSCARDS & MEMORABILIA LLC

FILED Jul 07, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|--|--|----------------------------------|--|---|--|
| 2325 STONE ABBEY BLVD ORLANDO, FL 32828 | | | | 2124 AUTUMN VIEW DRIVE ORLANDO, FL 32825 | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| | X 780988 DO, FL 32878 | | | | |
| In accord | | | FEI Number Not Applicable () npany did not receive the prior notic Name and Address | Certificate of Status Desired() e. of New Registered Agent: | |
| 5647 110 | GISTERED AGE 0TH AVE. NORT PALM BEACH, F | | | | |
| | ve named entity ate of Florida. | submits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both | |
| SIGNAT | URE: | | | | |
| | Electro | nic Signature of Registered Age | ent | Date | |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | ADDITIONS/CHANGES: | |
| Title: Name: | MGRM (MAN. EUGENE |) Delete | Title: Name: | () Change () Addition | |

Address:

City-St-Zip:

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.

SIGNATURE: EUGENE MAN **MCRM** 07/07/2008