2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Jul 10, 2007 08:00 AM Secretary of State DOCUMENT # L05000086636 INVEST IN CAPE, LLC Mailing Address Principal Place of Business 4418 SE 9TH PLACE 4418 SE 9TH PLACE CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 CR2E083 (11/05) 07022007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3413272 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PAVESE, FRANK JR. DO NOT WRITE 4635 S. DEL PRADO BLVD. CAPE CORAL, FL 33904 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, typed or printed name of registered apert and life if applicable. (NOTE Registered Agent signature regulard when reinstating) Filing Fee is \$50.00 Due by September 14, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME O'BRIEN, HEATHER STREET ADDRESS 4418 SE 9TH PLACE U00000767680 CITY-ST-7IP CAPE CORAL, FL 33904 07/10/07-80014-008 50.00 TITLE MAAK STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE