2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004218

Entity Name: MOLI, LLC

FILED Jan 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 580 VILLAGE BLVD. SUITE 110 WEST PALM BEACH, FL 33409 **New Mailing Address: Current Mailing Address:** 580 VILLAGE BLVD. SUITE 110 WEST PALM BEACH, FL 33409 FEI Number: 56-2488403 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: CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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: MGRM Title: () Change () Addition () Delete MAINSTREAM HOLDINGS,, LLC Name: Name: 580 VILLAGE BLVD. STE 110 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: CEOC () Delete Title: () Change () Addition COTSAKOS, CHRISTOS M DR Name: Name: Address: 580 VILLAGE BLVD., STE 110 Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: COOP () Delete Title: () Change () Addition BALINT, JUDY Name: Name: 580 VILLAGE BLVD., STE 110 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: () Delete Title: VCH Title: () Change () Addition Name: COTSAKOS, TAMI Name: 580 VILLAGE BLVD., STE 110 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: CIO () Delete Title: () Change () Addition EWING, DAVID Name: Name: 580 VILLAGE BLVD., STE. 110 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: (X) Change () Addition CHENEY, GEOFFREY C PETER, ARONSTAM J Name: Name: Address: 580 VILLAGE BLVD., STE. 110 Address: 580 VILLAGE BLVD., STE. 110 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409 City-St-Zip: 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: PETER ARONSTAM CFO 01/16/2008