

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000866

Entity Name: INFONETWORLD.COM, L.L.C.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

310 GENIUS DRIVE
WINTER PARK, FL 32789

New Principal Place of Business:

245 MAISON CT
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

310 GENIUS DRIVE
WINTER PARK, FL 32789

New Mailing Address:

245 MAISON CT
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3622393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHUDA, KHALED R
310 GENIUS DRIVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

KHUDA, KHALED R
245 MAISON CT
ALTAMONTE SPRINGS, FL 32714 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:

03/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: K.N., LTD., L.L.P.,
Address: 310 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: KHUDA, KHALED R MR.
Address: 310 GENIUS DRIVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: K.N., LTD., L.L.P.,
Address: 245 MAISON CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM (X) Change () Addition
Name: KHUDA, KHALED R MR.
Address: 245 MAISON CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: KHALED R.KHUDA

MR

03/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date