2006 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Jan 12, 2006 08:00 AM DOCUMENT # L00000002450 **Secretary of State** 1. Entity Name PHAT PROPERTIES, LLC. Principal Place of Business Mailing Address 9129 16TH AVE, CIR, NW 9129 16TH AVE. CIR. NW BRADENTON, FL 34209 BRADENTON, FL 34209 01052006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0988681 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LEHMAN, TIMOTH P DO NOT WRITE 9129 16TH AVE., CIR. N.W. BRADENTON, FL 34209 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) U00000384859 Filing Fee is \$50.00 Due by May 1, 2006 81/17/06-80032-014 50.00 9. MANAGING MEMBERS/MANAGERS MGRM meNAME LEHMAN, TIMOTHY P 9129 16TH AVE. CIR. N.W. STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP DEF NAME

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 ill limited liability company or the fleceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CICALATURE.

STREET ADDRESS CITY-ST-ZIP

LEHMAN