2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003136

Entity Name: OZONESOLUTIONS, L.C.

FILED Jun 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5657 WHISPERING OAKS DR NORTH PORT, FL 34287

Current Mailing Address: New Mailing Address:

5657 WHISPERING OAKS DR NORTH PORT, FL 34287

FEI Number: 52-2224243 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:

DOWNEY, JOHN A DOWNEY, JOHN A 1327 VIA MILANES

5657 WHISPERING OAKS DRIVE PUNTA GORDA, FL 33950 NORTH PORT, FL 34287 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: 06/05/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

MGR () Delete DOWNEY, JOHN Name: Address: 1327 VIA MILANES

City-St-Zip: PUNTA GORDA, FL 33950

Title: MGR () Delete Name: GEISER, ROY

Address: 166 WINDY HILL RD. City-St-Zip: LITITZ, PA 17543

ADDITIONS/CHANGES:

(X) Change () Addition

DOWNEY, JOHN Name:

Address: 5657 WHISPERING OAKS DRIVE

NORTH PORT, FL 34287 City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN A. DOWNEY 06/05/2004