


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000012495 1. Entity Name ISPPWARE, L.L.C.	
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Principal Place of Business 12807 W. HILLSBOROUGH AVENUE TAMPA, FL 33615	Mailing Address 12807 W. HILLSBOROUGH AVENUE STE K TAMPA, FL 33635
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01132005No Chg-LLC

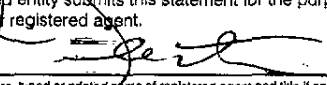
CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3681442	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FEINSTEIN, ERIC A 12807 W. HILLSBOROUGH AVENUE TAMPA, FL 33615	DO NOT WRITE IN THIS SPACE
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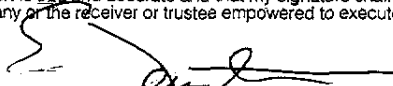
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE 	(NOTE, Registered Agent signature required when reinstating)	DATE <u>5/28/05</u>

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FEINSTEIN, ERIC A 12807 W. HILLSBOROUGH AVENUE, STE K. TAMPA, FL 33615
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04/05/05-60005-017 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: 	Date <u>3/28/05</u>	Daytime Phone # <u>813-72293</u>