2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# L01000006615

Entity Name: HETMAN DESIGN LTD. CO.

Current Principal Place of Business:

419 QUAY ASSIS
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

419 QUAY ASSISI
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

419 QUAY ASSISI
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 30-9882790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HETMAN, MICHAEL G
419 QUAY ASSISI
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR ( ) Delete
Name: HETMAN, MICHAEL G
Address: 419 QUAY ASSISI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

ADDITIONS/CHANGES:

Title: MR. (X) Change ( ) Addition
Name: HETMAN, MICHAEL G
Address: 419 QUAY ASSISI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: MICHAEL G. HETMAN MR. 05/31/2005

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