2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2007
Secretary of State

DOCUMENT# L01000015879

Entity Name: EVENT-PASS.COM, L.L.C.

Current Principal Place of Business:

2 ADALIA AVE
403
TAMPA, FL 33606 US

New Principal Place of Business:

2 ADALIA AVE
401
TAMPA, FL 33606 US

Current Mailing Address:

P.O. BOX 802
TAMPA, FL 33601 US

New Mailing Address:

FEI Number: 59-3742603 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SARCONE, SAM M
2 ADALIA AVE
SUITE 403
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

SARCONE, SAM M
2 ADALIA AVE
SUITE 401
TAMPA, FL 33606 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: SAM M. SARCONE 03/29/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SARCONE, SAM M
Address: P.O. BOX 802
City-St-Zip: TAMPA, FL 33601 US

ADDITIONS/CHANGES:

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 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: S AM M. SARCONE MGRM 03/29/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date