

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016937

Entity Name: 4 SURE ON LINE, LLC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

2121 NW 79 AVE
DORAL, FL 33122

New Principal Place of Business:

2123 NW 79TH AVENUE
DORAL, FL 33122

Current Mailing Address:

2121 NW 79TH AVENUE
DORAL, FL 33122

New Mailing Address:

5093 SW 155TH AVE
MIRAMAR, FL 33027

FEI Number: 90-0152527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOBLICCI, FABIO
2121 NW 79 STREET
DORAL, FL 33122 US

Name and Address of New Registered Agent:

MOBLICCI, FABIO
5093 SW 155TH AVE
MIRAMAR, FL 33027 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: FABIO MOBLICCI

04/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOBLICCI, FABIO
Address: 2121 NW 79 ST
City-St-Zip: DORAL, FL 33122

Title: MGR () Delete
Name: FLEMING, MARIA M
Address: 1436 N.W. 154 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOBLICCI, FABIO
Address: 5093 SW 155TH AVE
City-St-Zip: MIRAMAR, FL 33027

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: FABIO MOBLICCI

MGR

04/23/2007

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