2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 07, 2005 8:00 am Secretary of State

Principal Place of Business 479 BALLARD DRIVE MELBOURNE, FL 32935 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country To Country 5. Certificate of Status Desired Fee Required Fee Required Fee Required Fee Required Fire Name and Address of New Registered Agent Name JORCZAK, MARIE INTERNATIONAL BUSINESS INCORPORATORS 8108 SW 103RD AVE. MIAMI, FL 33173 City FL Zip Code 8. The above named entity submits this antisyment towns, principals of chapting its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are time of agents. Which is the state of Florida. I am familiar with, and accept the obligations of registered agent are time of agents. Which is the state of Florida. I am familiar with, and accept the obligations of registered agent are time of graduate required when remotating) Make check payable to Florida Department of State Make check payable to Florida Department of State
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City & State Applied For 22-3835716 Country Status Desired 5. Certificate of Status Desired Fee Required 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name Name Street Address (P.O. Box Number is Not Acceptable) 8. The above named entity submits this enterment for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Wheed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to
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Filling Fee is \$50.00 Make check payable to
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1 State Separation of State
9 MANAGING MEMBERS/MANAGERS
TITLE MGR Delete TITLE 45 Change Addition
NAME VALO, MICHAEL L
STREET ADDRESS 905 N. HARBOR CITY BLVD. CITY-ST-ZIP MELBOURNE, FL 32935 NAME STREET ADDRESS 2720 Big Pin Road CITY-ST-ZIP Melbourne FL 32934
TITLE Delete TITLE Change Addition
NAME NAME
STREET ADDRESS STREET
CITY-S1-ZIP CITY-S1-ZIP
TITLE Delete TITLE Change Addition NAME NAME
STREET ADDRESS STREET ADDRESS
CITY-ST-ZIP CITY-ST-ZIP
TITLE Delete TITLE Change Addition
NAME NAME STREET ADDRESS STREET ADDRESS
CITY-ST-ZIP CITY-S1-ZIP
TITLE Delete TITLE Change Addition
NAME NAME
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
TITLE - Change Addition
NAME NAME
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
CITY-ST-ZIP 1. Thereby 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

shall have the same legal effect as if made under oath; that I am a managing member or manager of the xecuse this report as required by Chapter 608, Florida Statutes. limited liability company or the receiver or

SIGNATURE: Washing Managing Member, Manager, OR Authorized REPRESENTATIVE

321-795-4549

Date