2005 LIMITED LIABILITY COMPANY - ANNUAL REPORT

DOCUMENT # L01000019795

1. Entity Name

CITY-ST-ZIP

SIGNATURE: X

GO FAST FISHING, LLC

Mailing Address Principal Place of Business 11769 BARB CT. 11769 BARB CT. LARGO, FL 33778-3803 LARGO, FL 33778-3803 04262005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3755988 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MAISANO, SAM B 11769 BARB CT. LARGO, FL 33778-3803 IN THIS SPACE 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) Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE MAISANO, SAM NAME 11769 BARB CT STREET ADDRESS LARGO, FL 337783803 CITY-ST-ZIP 000000350002 05/02/05-80088-005 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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.

Sam Maisano

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× 4/27/05

Apr 30, 2005 08:00 AM Secretary of State