2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

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Entity Name: IFINITY LLC

Current Principal Place of Business:

1943 JACQUES DRIVE
VIERA, FL 32940

New Principal Place of Business:

1220 W NEW HAVEN
#150
MELBOURNE, FL 32904

Current Mailing Address:

1943 JACQUES DRIVE
VIERA, FL 32940

New Mailing Address:

1220 W NEW HAVEN
#150
MELBOURNE, FL 329403290

FEI Number: 59-3588075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WIRKUS, JAN E
1943 JACQUES DRIVE
VIERA, FL 32940 US

Name and Address of New Registered Agent:

WIRKUS, JAN E
1220 W NEW HAVEN
#150
MELBOURNE, FL 32904 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: JAN WIRKUS 04/29/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WIRKUS, JAN E
Address: 1943 JACQUES DRIVE
City-St-Zip: VIERA, FL 32940 US

Title: MGRM ( ) Delete
Name: DYKE, ABRAM J
Address: 1943 JACQUES DRIVE
City-St-Zip: VIERA, FL 32940 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WIRKUS, JAN E
Address: 1220 W NEW HAVEN
City-St-Zip: MELBOURNE, FL 32904 US

Title: MGRM (X) Change ( ) Addition
Name: DYKE, ABRAM J
Address: 1220 W NEW HAVEN
City-St-Zip: MELBOURNE, FL 32904 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: JAN WIRKUS MGRM 04/29/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date