2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008229

Entity Name: INB SYSTEMS L.L.C.

Name:

Address:

City-St-Zip:

750 S. FEDERAL HWY

HOLLYWOOD, FL 33020

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 750 S FEDERAL HWY STE 101 HOLLYWOOD, FL 33020 US **New Mailing Address: Current Mailing Address:** 750 S FEDERAL HWY STE 101 HOLLYWOOD, FL 33020 US FEI Number: 03-0423863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAMOTHE, FERNAND 1401 DEWEY STREET HOLLYWOOD, FL 33020 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MOCCIA, LOUIS Name: Name: Address: 750 S FEDERAL HWY Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BACCHELLI, SANDRO Name: Address: 750 S FEDERAL HWY Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: Title: MGR () Delete Title: () Change () Addition PEREZ, CHRISTOPHER Name: Name: Address: 750 S. FEDERAL HWY Address: City-St-Zip: HOLLY7WOOD, FL 33020 City-St-Zip: Title: MGR () Delete Title: () Change () Addition COLEMAN, MARTIN

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: LOUIS MOCCIA 05/01/2007