

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010001

Entity Name: ICEBREAKERS, LLC

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

3956 TOWN CENTER BLVD.
SUITE 157
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD.
SUITE 157
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 02-0599452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAVES, DONNA L
120 EAST CONCORD STREET
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGRM () Delete
Name: VAN MALLEGHEM, JIMMY
Address: 3956 TOWN CENTER BLVD., #157
City-St-Zip: ORLANDO, FL 32837

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: DIGWEED, JOHN
Address: 3956 TOWN CENTER BLVD #157
City-St-Zip: ORLANDO, FL 32837

Title: MGR () Change (X) Addition
Name: COE, ALEXANDER
Address: 3956 TOWN CENTER BLVD #157
City-St-Zip: ORLANDO, FL 32837

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: JIMMY VAN MALLEGHEM

MGMR

04/14/2005

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