2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019312

Entity Name: CACTUS MARINE, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
9691 NW 25TH STREET SUNRISE, FL 33322 US	9531 NW 42ND STREET SUNRISE, FL 33351 US

Current Mailing Address:	**New Mailing Address:**
9691 NW 25TH STREET SUNRISE, FL 33322 US	9531 NW 42ND STREET SUNRISE, FL 33351 US

FEI Number: 56-2542653   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WILSON, STEVE 9691 NW 25TH STREET SUNRISE, FL 33322 US	WILSON, STEVE 9531 NW 42ND STREET SUNRISE, FL 33351 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: _____   04/25/2008
             Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

| **ADDITIONS/CHANGES:** |

Title: MGRM ( ) Delete Name: WILSON, STEVE Address: 9691 NW 25TH STREET City-St-Zip: SUNRISE, FL 33322 US	Title: MGRM (X) Change ( ) Addition Name: WILSON, STEVE Address: 9531 NW 42ND STREET City-St-Zip: SUNRISE, FL 33351 US
Title: MGRM ( ) Delete Name: WILSON, JOHNNA C MRS Address: 9691 NW 25TH STREET City-St-Zip: SUNRISE, FL 33322 US	Title: MGRM (X) Change ( ) Addition Name: WILSON, JOHNNA C MRS Address: 9531 NW 42ND STREET City-St-Zip: SUNRISE, FL 33351 US

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.

SIGNATURE: JOHNNA C WILSON   MGRM   04/25/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date