2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 25, 2008 08:00 AN Secretary of State

| ANNUAL REPORT | | | | Secretary of S | |
|---|---|--|-----------------------|---|---|
| 1. Entity Name | MENT # L02000024 | 110 | | | |
| Principal Place 853 SE MON STUART, FL | e of Business TEREY COMMONS BLVD. | Meiling Address 853 SE MONTEREY COMMONS STUART, FL 34996 | BLVD. | | OGIO MEN BUESI NOSI KAN BUKUK IN JESI |
| D | O NOT WRITE | | CE | 01092008 No Chg-LLC 4. FEI Number NOT APPLICABLE 5. Certilicate of Status Desired | CR2E083 (12/07) Applied For Not Applicable \$5.00 Additional Fee Required |
| | 6. Name and Address of Current ROBERT S DNTEREY COMMONS BLVD. FL 34996 | Registered Agent | | DO NOT WE | • |
| the obligati | named entity submits this statement failure of registered agent. Signature, typed or proted name of registered agent. NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.7 | s and lide if applicable. (NOTE: Registere | ed ollice or register | _ | DATE |
| O. TITLE MAKE STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP | MANAGING MEMB MGRM TEXTOR SECOND TIER LIMITE 318 NORTH CARSON STREET CARSON CITY, NV 89701 | ED PARTNERSHIP | | | |
| STOUCT LOCURES | | | | | |

11. I hereby certify that the information applied with this ting does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report is true and accurate add 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 required or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ____

SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING MANAGING NEMBER, OR AUTHORIZED REPRESENTATIVE

1/23/08 (561)277-640