

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025064

FILED
Mar 10, 2005
Secretary of State

Entity Name: INDEX AUTOMATION & TECHNOLOGY LLC

Current Principal Place of Business:

16413 SAPPHIRE BEND
WESTON, FL 33331

New Principal Place of Business:

1359 CHATFIELD PLACE
ORLANDO, FL 32814

Current Mailing Address:

P.O. BOX 268178
FT. LAUDERDALE, FL 33326

New Mailing Address:

P.O. BOX 141161
ORLANDO, FL 32814 US

FEI Number: 22-3701877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAM, LIEM
16413 SAPPHIRE BEND
WESTON, FL 33331 US

Name and Address of New Registered Agent:

LAM, LIEM
7522 REDWOOD COUNTRY ROAD
ORLANDO, FL 32835 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: LIEM B. LAM

03/10/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LAM, LIEM B MR.
Address: 16413 SAPPHIRE BEND
City-St-Zip: WESTON, FL 33331

Title: MGRM () Delete
Name: MALERBI, PAULO E MR.
Address: P.O. BOX 268178
City-St-Zip: FT. LAUDERDALE, FL 33326

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAM, LIEM B MR.
Address: 7522 REDWOOD COUNTRY ROAD
City-St-Zip: ORLANDO, FL 32835 US

Title: MGRM (X) Change () Addition
Name: MALERBI, PAULO E MR.
Address: P.O. BOX 141161
City-St-Zip: ORLANDO, FL 32814 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: LIEM B. LAM

MGRM

03/10/2005

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