## 2006 LIMITED LIABILITY COMPANY

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## **FILED** ANNUAL REPORT Aug 21, 2006 08:00 Al Secretary of State **DOCUMENT # L02000026007** 1. Entity Name OPTIMAL TECHNOLOGIES INTERNATIONAL, L.L.C. Principal Place of Business . Mailing Address 8538 RÉDLEAF LANE 8538 REDLEAF LANE ORLANDO, FL 32819 ORLANDO, FL 32819 08162006 No Chg-LLC CR2E083 (11/05) O NOT WRITE IN THIS SPACE 4. FEI Number Applied For 13-4222023 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent gar gar transfer was DANIELS, CHARLES W DO NOT WRITE 8538 REDLEAF LANE ORLANDO, FL 32819 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable Filing Fee Is \$50.00 Due by September 6, 2006 *U00000*574882 MANAGING MEMBERS/MANAGERS 9. MGR TITLE DANIELS, CHARLES HAME STREET ADDRESS 8538 REDLEAF LN CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME STREET ADDRESS CITY, ST. 7IP TITLE NAME STREET ADDRESS DO NOT WR CITY-ST-ZIP TITLE N THIS SPAC NAME STREET ADDRESS CJIY-ST-7IP TITLE

11. I hereby certify that the information supplied with this filing 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 and 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.