2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2007
Secretary of State

DOCUMENT# L03000008349

Entity Name: MIALKI BROTHERS, LLC

Current Principal Place of Business:

P.O. BOX 290459
PORT ORANGE, FL 321290459

New Principal Place of Business:

3658 NOVA RD
PORT ORANGE, FL 32119

Current Mailing Address:

P.O. BOX 290459
PORT ORANGE, FL 321290459

New Mailing Address:

FEI Number: 31-1821191 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRIEBIS, DANIEL S
3890 TURTLE CREEK DRIVE, SUITE B-1
PORT ORANGE, FL 32127 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/MANAGERS:

Title: MGRM ( ) Delete
Name: MIALKI, ANGIE
Address: P.O. BOX 290459
City-St-Zip: PORT ORANGE, FL 321290459

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

ADDITIONS/CHANGES:

Title: MEMB (X) Change ( ) Addition
Name: MIALKI, JOSEPH J
Address: 2376 MEADOW LANE
City-St-Zip: PORT ORANGE, FL 32128

Title: MEMB ( ) Change (X) Addition
Name: MIALKI, ANDREW
Address: 3712 HONEYDEW LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGIE MIALKI MRS 03/13/2007

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