2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Mar 03, 2006
Secretary of State

DOCUMENT# L03000014882

Entity Name: NOSIDE, LLC

Current Principal Place of Business:

3302 W SITKA ST.
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

PO BOX 15842
TAMPA, FL 33684

New Mailing Address:

FEI Number: 86-1097233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, GLORIA E
3302 W SITKA ST.
TAMPA, FL 33614 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: MGR ( ) Delete
Name: DAVIS, GLORIA E
Address: 3302 W SITKA ST.
City-St-Zip: TAMPA, FL 33614 US

Title: MGR (X) Delete
Name: DAVIS, WILLIAM L
Address: 3302 W. SITKA ST.
City-St-Zip: TAMPA, FL 33614 US

ADDITIONS/CHANGES:

Title: MBR (X) Change ( ) Addition
Name: KONTACT ENTERPRISES,, INC.
Address: 3302 W SITKA ST.
City-St-Zip: TAMPA, FL 33614 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GLORIA E. DAVIS PRES 03/03/2006

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