

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016551

FILED
Apr 25, 2007
Secretary of State

Entity Name: AQ R&D, LLC

Current Principal Place of Business:

68 SARASOTA CENTER BLVD.
SARASOTA, FL 34240

New Principal Place of Business:

300 SARASOTA CENTER BLVD.
SARASOTA, FL 34240

Current Mailing Address:

68 SARASOTA CENTER BLVD.
SARASOTA, FL 34240

New Mailing Address:

300 SARASOTA CENTER BLVD.
SARASOTA, FL 34240

FEI Number: 13-4251196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACASKILL, JOHN D
68 SARASOTA CENTER BLVD.
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

MACASKILL, JOHN D
300 SARASOTA CENTER BLVD.
SARASOTA, FL 34240 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:

04/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUKI, KOJI MEMBER
Address: 3641 BAYOU CIRCLE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGR () Delete
Name: MACASKILL, JOHN D
Address: 68 SARASOTA CENTER BLVD.
City-St-Zip: SARASOTA, FL 34240

Title: MGRM () Delete
Name: KUKI, YASUYUKI MEMBER
Address: 3641 BAYOU CIRCLE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGRM () Delete
Name: KUKI, YASUSHI MEMBER
Address: 3641 BAYOU CIRCLE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGRM () Delete
Name: KUKI, YASUHIRO MEMBER
Address: 3641 BAYOU CIRCLE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGRM () Delete
Name: KUKI, KOSUKE MEMBER
Address: 3641 BAYOU CIRCLE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MACASKILL, JOHN D
Address: 300 SARASOTA CENTER BLVD.
City-St-Zip: SARASOTA, FL 34240

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHN D. MACASKILL

MGR

04/25/2007

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