2007 LIMITED LIABILITY COMPANY ANNUAL REPORT **FILED** Apr 24, 2007 08:00 All Secretary of State DOCUMENT # L03000027736 1. Entity Name ARIANA HOLDINGS, LLC Principal Place of Business Mailing Address 1427 OCEAN VIEW DRIVE 1427 OCEAN VIEW DRIVE TIERRA VERDE, FL 33715 TIERRA VERDE, FL 33715 04162007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HINES, JAMES P JR 315 S. HYDE PARK AVENUE TAMPA, FL 33606 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. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 U000000728686 05/08/07-80007-010 150.00 MANAGING MEMBERS/MANAGERS 9. MGR TITLE LOSCH, SCOTT A NAME STREET ADDRESS 1427 OCEAN VIEW DRIVE CITY-ST-ZIP TIERRA VERDE, FL 33715 TITLE LOSCH, DEBRA A NAME 1427 OCEAN VIEW DRIVE STREET ADDRESS TIERRA VERDE, FL 33715 CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 eath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutos.

SIGNATURE:

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