

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031337

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: MOSIS ENTERPRISE, L.C.

**Current Principal Place of Business:**

15560 MCGREGOR BLVD.  
UNIT # 8  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

**Current Mailing Address:**

5109 DEL PRADO BLVD.  
CAPE CORAL, FL 33904

**New Mailing Address:**

FEI Number: 54-2135315

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARTEL, VIOLA ACCOUNT  
5109 DEL PRADO BLVD.  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

COLLINS, VIOLA ACCOUNT  
5109 DEL PRADO BLVD.  
CAPE CORAL, FL 33904 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: VIOLA COLLINS

04/21/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHMIDT, ANDREAS  
Address: SCHULSTR. 18  
City-St-Zip: SCHONDORF A.AMMERSEE,GERMANY, D D-86938 D

**ADDITIONS/CHANGES:**

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: ANDREAS SCHMIDT

MGRM

04/21/2008

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