

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035584

Entity Name: SQUISHYWORKS, LLC

FILED
Jun 05, 2007
Secretary of State

Current Principal Place of Business:

8254 N. CREEK WAY
CITRUS SPRINGS, FL 34434

New Principal Place of Business:

4212 AUTUMN LEAVES DR
TAMPA, FL 33624

Current Mailing Address:

8254 N. CREEK WAY
CITRUS SPRINGS, FL 34434

New Mailing Address:

4212 AUTUMN LEAVES DR
TAMPA, FL 33624

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RIIKONEN, CHRISTOPHER
8254 N. CREEK WAY
CITRUS SPRINGS, FL 34434 US

Name and Address of New Registered Agent:

RIIKONEN, CHRISTOPHER
4212 AUTUMN LEAVES DR
TAMPA, FL 33624 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:

06/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RIIKONEN, CHRISTOPHER J
Address: 8254 N. CREEK WAY
City-St-Zip: CITRUS SPRINGS, FL 34434 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RIIKONEN, CHRISTOPHER J
Address: 4212 AUTUMN LEAVES DR
City-St-Zip: TAMPA, FL 33624 US

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: CHRISTOPHER J RIIKONEN

MGRM

06/05/2007

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