## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000050476

Entity Name: FLORIDA M.E.P. ENGINEERING LLC

| Current Principal Place of Business:   | New Principal Place of Business:   |  |
|--|--|--|
| 650 S. NORTH LAKE BLVD.<br>SUITE 510   | 600 S. NORTH LAKE BLVD.<br>SUITE 180   |  |
| ALTAMONTE SPRINGS, FL 32701 US   | ALTAMONTE SPRINGS, FL 32701 US   |  |
| Current Mailing Address:   | New Mailing Address:   |  |
| 650 S. NORTH LAKE BLVD.<br>SUITE 510<br>ALTAMONTE SPRINGS, FL 32701 US                     | 600 S. NORTH LAKE BLVD.<br>SUITE 180<br>ALTAMONTE SPRINGS, FL 32701 US                     |  |
| FEI Number: 61-1461034 FEI Number Applied For ( )  | FEI Number Not Applicable () Certificate of Status Desired ()                              |  |
| Name and Address of Current Registered Agent:  | Name and Address of New Registered Agent:  |  |
| COST, BENJAMIN L<br>650 S. NORTH LAKE BLVD.<br>SUITE 510<br>ALTAMONTE SPRINGS, FL 32701 US | COST, BENJAMIN L<br>600 S. NORTH LAKE BLVD.<br>SUITE 180<br>ALTAMONTE SPRINGS, FL 32701 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: BENJAMIN L. COST 04/23/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: MGRM () Delete Title: MGRM (X) Change () Addition COST, BENJAMIN L COST, BENJAMIN L Name: Name<sup>.</sup> Address: 1143 BILTSDALE CT. Address: 1646 SONG SPARROW CT. City-St-Zip: APOPKA, FL 32712 US City-St-Zip: SANFORD, FL 32773 US (X) Change ( ) Addition Title: MGRM () Delete Title: MGRM Name: TIRADO, SHEILA Name: TIRADO, SHEILA 906 MOONLUSTER DR. Address: 709 HEATHER LANE Address: WINTER SPRINGS, FL 32708 US City-St-Zip: City-St-Zip: CASSELBERRY, FL 32707 US Title: MGRM () Delete Title: () Change () Addition STOFFER, RANDALL D Name: Name: 10381 HART BRANCH CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32832 US 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: | BENJAMIN L. COST                                 | MGMR                                 | 04/23/2007 |
|------------|--|--------------------------------------|------------|
|            | Electronic Signature of Signing Managing Member, | Manager, or Authorized Representativ | /e / Date  |

## FILED Apr 23, 2007 Secretary of State