

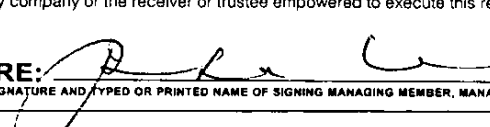


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90112 021 \*\*\*\*50.00

<b>DOCUMENT # L04000017396</b> 1. Entity Name <b>FUEL INVESTMENTS &amp; DEVELOPMENT LLC</b>					
Principal Place of Business <b>3105 W. WATERS AVE. SUITE 315 TAMPA, FL 33614</b>			Mailing Address <b>3105 W. WATERS AVE. SUITE 315 TAMPA, FL 33614</b>		
2. Principal Place of Business - No P.O. Box # <b>ONE TAMPA CITY CENTER</b> Suite, Apt. #, etc. <b>SUITE 2505</b> City & State <b>TAMPA FL</b> Zip <b>33602</b>		3. Mailing Address <b>ONE TAMPA CITY CENTER</b> Suite, Apt. #, etc. <b>SUITE 2505</b> City & State <b>TAMPA FL</b> Zip <b>33602</b>			
04112007 Chg-LLC CR2E083 (12/06)				4. FEI Number <b>20-0809459</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>PARAGON CAPITAL PARTNERS, LLC 3105 W WATERS AVE SUITE 107 TAMPA, FL 33614</b>			7. Name and Address of New Registered Agent Name <b>PUNWANI, AMEET</b> Street Address (P.O. Box Number is Not Acceptable) <b>ONE TAMPA CITY CENTER</b> <b>SUITE 2505</b> City <b>TAMPA</b>		
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, typed or printed name of registered agent and title if applicable <b>Ameet A Punwani</b>		
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LALWANI, INDIRA 3105 W. WATERS AVE. SUITE 315 TAMPA, FL 33614	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LALWANI, JIWAT ONE TAMPA CITY CENTER SUITE 2505 TAMPA - FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PARAGON DEVELOPMENT MANAGERS, LLC 3105 W. WATERS AVE. SUITE 107 TAMPA, FL 33614	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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:  J.S. LALWANI 4/19/07 813-600-2984					