

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000022251

Entity Name: LI BUSINESS LLC

FILED
Jun 19, 2007
Secretary of State

Current Principal Place of Business:

1646 TRADE CENTER WAY
NAPLES, FL 34109

New Principal Place of Business:

10037 HEATHER LN
401
NAPLES, FL 34119

Current Mailing Address:

1646 TRADE CENTER WAY
NAPLES, FL 34109

New Mailing Address:

10037 HEATHER LN
401
NAPLES, FL 34119

FEI Number: 20-0945878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIS, ELMA
1646 TRADE CENTER WAY
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

REIS, ELMA
10037 HEATHER LN
401
NAPLES, FL 34119 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: ELMA REIS

06/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: REIS, ELMA
Address: 1646 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109 US

Title: MGRM () Delete
Name: QUAGLIARIELLO, LINO
Address: 1646 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: REIS, ELMA
Address: 10037 HEATHER LN 401
City-St-Zip: NAPLES, FL 34119 US

Title: MGRM (X) Change () Addition
Name: QUAGLIARIELLO, LINO
Address: 10037 HEATHER LN 401
City-St-Zip: NAPLES, FL 34119

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: ELMA REIS

MGRM

06/19/2007

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