2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024450

Entity Name: FIDS "LLC"

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

900 VALASTICS AVE 367 OSBORNE DR NE

314 FORT WALTON BEACH, FL 32578 US VALPARAISO, FL 32578 US

Current Mailing Address: New Mailing Address:

P.O.BOX 1602

FT. WALTON BEACH, FL 32549 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

FIDLER, SHAWN M 315 BREAM AVE. 205

FT. WALTON BEACH, FL 32548 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: FIDLER, SHAWN M Name: FIDLER, SHAWN M Address: 315 BREAM AVE. STE 205 Address: 367 OSBORNE DR NE

City-St-Zip: FT. WALTON BEACH, FL 32548 US City-St-Zip: FT. WALTON BEACH, FL 32548 US

Title: () Delete Title: MGR () Change (X) Addition

 Name:
 Name:
 PANACEK, PETR

 Address:
 Address:
 516 JUNIPER AVE

 City-St-Zip:
 City-St-Zip:
 NICEVILLE, FL 32578

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: SHAWN FIDLER MGRM 03/28/2006