2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028435

Entity Name: PATHOPTIONS, LLC

Address:

City-St-Zip:

311 SE 8TH COURT

POMPANO BEACH, FL 33060

FILED Feb 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 709 SAINT ANDREWS ROAD HOLLYWOOD, FL 33021 **Current Mailing Address: New Mailing Address:** 709 SAINT ANDREWS ROAD HOLLYWOOD, FL 33021 FEI Number: 20-1010346 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: RUDOLPH, JASON ESQ 10800 BISĆAYNE BOULEVARD SUITE 580 MIAMI, FL 33161 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: () Delete Title: () Change () Addition KARTEN, DANIEL Name: Name: Address: 709 SAINT ANDREWS ROAD Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BRUNDAGE, GRANT Name:

Address:

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: DANIEL KARTEN MGR 02/25/2006