2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000028949

Entity Name: HISBIZ LLC

City-St-Zip:

FILED Dec 06, 2005 Secretary of State

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

1817 SPRUCE CREEK BLVD. 175 S. NOVA ROAD

PORT ORANGE, FL 32128 US SUITE 3

ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

P.O. BOX 291081 P.O. BOX 291127

PORT ORANGE, FL 32129 US PORT ORANGE, FL 32129 US

FEI Number: 52-2441338 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:

JOHNSON, STEPHEN E

1817 SPRUCE CREEK BOULEVARD EAST

JOHNSON, STEPHEN E

5231 SOUTH NOVA ROAD

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32127 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: STEPHEN E. JOHNSON 12/06/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: JOHNSON, STEPHEN E JOHNSON, STEPHEN E

Address: 1817 SPRUCE CREEK BLVD. EAST Address: 6661 MERRYVALE LANE
City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32128

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

Name: JOHNSON, CAROL G Name: JOHNSON, TIMOTHY N
Address: 1817 SPRUCE CREEK BLVD. EAST Address: P.O. BOX 291081

City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32128

Title:MGR () DeleteTitle:MGR (X) Change () AdditionName:JOHNSON, TIMOTHY NName:JOHNSON, CHRISTOPHER RAddress:P.O. 291081Address:6661 MERRYVALE LANE

City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32128

Title: MGR () Delete Title: MGR (X) Change () Addition Name: JOHNSON, CHRISTOPHER R Name: JOHNSON, GEOFFREY B Address: 6661 MERRYVALE LANE

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

 Name:
 JOHNSON, MICHAEL G
 Name:

 Address:
 1817 SPRUCE CREEK BLVD. EAST
 Address:

 City-St-Zip:
 PORT ORANGE, FL 32128
 City-St-Zip:

PORT ORANGE, FL 32128

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

 Name:
 JOHNSON, GEOFFREY B
 Name:

 Address:
 1817 SPRUCE CREEK BOULEVARD EAST
 Address:

 City-St-Zip:
 PORT ORANGE, FL 32128
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

PORT ORANGE, FL 32128

SIGNATURE: STEPHEN E. JOHNSON MGR 12/06/2005