2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031416

Entity Name: STATE OF KNOWLEDGE LLC

FILED May 01, 2006 Secretary of State

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

16850-112 COLLINS AVE #286 16850-112 COLLINS AVE SUNNY ISLES BEACH, FL 33160

SUITE #286

SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

16850-112 COLLINS AVE 16057 TAMPA PALMS BLVD. WEST

STE 378 SUITE #286 TAMPA, FL 33647

SUNNY ISLES BEACH, FL 33160

FEI Number: 35-2251723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

FARHAD, FAREID FARHAD, FAREID 16850-112 COLLINS AVE 16850-112 COLLINS AVE #286

SUNNY ISLES BEACH, FL 33160 US SUITE #286

SUNNY ISLES BEACH, FL 33160 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: FAREID FARHAD 05/01/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

FARHAD, FAREID FARHAD, FAREID Name: Name: Address: 16850-112 COLLINS AVE #286 Address: 16850-112 COLLINS AVE #286

City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Delete Title: MGRM () Change (X) Addition AVENUE GROUP LLC, Name: Name:

Address: Address: 16850-112 COLLINS AVE #286 City-St-Zip: City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: FAREID FARHAD **MGRM** 05/01/2006