

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031416

FILED
Mar 20, 2007
Secretary of State

Entity Name: STATE OF KNOWLEDGE LLC

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 35-2251723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARHAD, FAREID
16850-112 COLLINS AVE
SUITE #286
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: FARHAD, FAREID
Address: 16850-112 COLLINS AVE #286
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM () Delete
Name: AVENUE GROUP LLC,
Address: 16850-112 COLLINS AVE #286
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: FAREID FARHAD

MGR

03/20/2007

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