2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2007
Secretary of State

DOCUMENT# L04000046437

Entity Name: COZZA NOZTRA, LLC

Current Principal Place of Business:

3117 SPRING GLEN ROAD #403
JACKSONVILLE, FL 32207

New Principal Place of Business:

4560 PINEWOOD AVENUE
JACKSONVILLE, FL 32207

Current Mailing Address:

4250 CAMELLIA CIRCLE EAST
JACKSONVILLE, FL 32207

New Mailing Address:

4560 PINEWOOD AVENUE
JACKSONVILLE, FL 32207

FEI Number: 20-1278098 **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:

SIMPSON, DAVID
4250 CAMELLIA CIRCLE EAST
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

SIMPSON, DAVID
4560 PINEWOOD AVENUE
JACKSONVILLE, FL 32207 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: 07/18/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: PRES ( ) Delete
Name: DAVID, SIMPSON
Address: 4250 CAMELLIA CIRCLE EAST
City-St-Zip: JACKSOVILLE, FL 32207

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: DAVID, SIMPSON
Address: 4560 PINEWOOD AVENUE
City-St-Zip: JACKSOVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify 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: DAVID SIMPSON PRES 07/18/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date