

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046822

Entity Name: MIAMI SODA BLASTERS, LLC

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

1717 N. BAYSHORE DR., UNIT 3555
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1717 N. BAYSHORE DR., UNIT 3555
MIAMI, FL 33132

New Mailing Address:

FEI Number: 20-1379678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMETZ, KARL J ESQ
18305 BISCAYNE BLVD., STE 216
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

OLSEN, JOYCE A PRES
1717 N. BAYSHORE DR., UNIT 3555
MIAMI, FL 33132 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: JOYCE OLSEN

04/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OLSEN, VICTOR H
Address: 1717 N BAYSHORE DR., UNIT 3555
City-St-Zip: MIAMI, FL 33132

Title: MGRM () Delete
Name: OLSEN, JOYCE A
Address: 1717 N BAYSHORE DR., UNIT 3555
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OLSEN, VICTOR H VP
Address: 1717 N BAYSHORE DR., UNIT 3555
City-St-Zip: MIAMI, FL 33132

Title: MGRM (X) Change () Addition
Name: OLSEN, JOYCE A PRES
Address: 1717 N BAYSHORE DR., UNIT 3555
City-St-Zip: MIAMI, FL 33132

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: JOYCE OLSEN

PRES

04/27/2006

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