

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055669

Entity Name: EUPHORIA WATER LLC

FILED
Jul 30, 2007
Secretary of State

Current Principal Place of Business:

1125 NE 125TH STREET
SUITE 200
NORTH MIAMI, FL 33161

Current Mailing Address:

1125 NE 125TH STREET
SUITE 200
NORTH MIAMI, FL 33161

New Principal Place of Business:

12864 BISCAYNE BLVD
#375
NORTH MIAMI, FL 33181

New Mailing Address:

12864 BISCAYNE BLVD
#375
NORTH MIAMI, FL 33181

FEI Number: 65-0941993 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:

LIPSKAR, ZALMAN CEO
1125 NE 125TH STREET
SUITE 200
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

LIPSKAR, ZALMAN CEO
12864 BISCAYNE BLVD
#375
NORTH MIAMI, FL 33181 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: _____

07/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: LIPSKAR, ZALMAN
Address: 1125 NE 125TH STREET, SUITE 200
City-St-Zip: NORTH MIAMI, FL 33161

Title: PRES () Delete
Name: AINSWORTH, DOVY
Address: 1125 NE 125TH STREET, SUITE 200
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: LIPSKAR, ZALMAN
Address: 12864 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

Title: PRES (X) Change () Addition
Name: AINSWORTH, DOVY
Address: 12864 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

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: ZALMAN LIPSKAR

CF

07/30/2007

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