

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066785

FILED
Aug 26, 2007
Secretary of State

Entity Name: ADVANCED ALUMINUM CREATIONS, LLC

Current Principal Place of Business:

3673 EXCHANGE AVENUE
SUITE 3
NAPLES, FL 34104 US

New Principal Place of Business:

5830 DOGWOOD WAY
NAPLES, FL 34116 US

Current Mailing Address:

3673 EXCHANGE AVENUE
SUITE 3
NAPLES, FL 34104 US

New Mailing Address:

5830 DOGWOOD WAY
NAPLES, FL 34116 US

FEI Number: 75-3165435 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:

ADVANCED ALUMINUM CREATIONS
3673 EXCHANGE AVENUE
SUITE 3
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

ANDERSON, STACEY
ADVANCED ALUMINUM CREATIONS
5830 DOGWOOD WAY
NAPLES, FL 34116 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: STACEY ANDERSON

08/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANDERSON, JOSEPH
Address: 3673 EXCHANGE AVENUE #3
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM () Delete
Name: ANDERSON, STACEY
Address: 3673 EXCHANGE AVENUE #3
City-St-Zip: NAPLES, FL 34104 US

Title: MGRM () Delete
Name: ANDERSON, MICHAEL
Address: 3673 EXCHANGE AVENUE #3
City-St-Zip: NAPLES, FL 34104 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANDERSON, JOSEPH
Address: 5830 DOGWOOD WAY
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM (X) Change () Addition
Name: ANDERSON, STACEY
Address: 5830 DOGWOOD WAY
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM (X) Change () Addition
Name: ANDERSON, MICHAEL
Address: 5830 DOGWOOD WAY
City-St-Zip: NAPLES, FL 34116 US

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: STACEY ANDERSON

MGRM

08/26/2007

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