## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR

## **FILED** Feb 19, 2008 08:00 AM **DOCUMENT # L04000079737 Secretary of State** 1. Entity Name INVENTIVE IRON WELDING LLC Principal Place of Business Mailing Address 834 SW 35TH STREET 834 SW 35TH STREET PALM CITY, FL 34990 PALM CITY, FL 34990 02072008No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number 59-1975513 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOULT, CHINKA DO NOT WRITE 834 SW 35TH STREET PALM CITY, FL 34990 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000832238 02/27/08-80051-006 138.75 9. MANAGING MEMBERS/MANAGERS MGRM TITLE HOULT, CHINKA NAME STREET ADDRESS 834 SW 35TH STREET CITY-ST-ZIP PALM CITY, FL 34990 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WR CITY-ST-7IP TITLE IN THIS SPAC NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.