



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90161 002 ****50.00

DOCUMENT # L04000084841 1. Entity Name IMPACT TECHNOLOGIES GROUP, LLC																													
Principal Place of Business 255 EVERNIA ST SUITE 1007 WEST PALM BEACH, FL 33401 US			Mailing Address 255 EVERNIA ST SUITE 1007 WEST PALM BEACH, FL 33401 US																										
2. Principal Place of Business 255 EVERNIA ST <small>Suite, Apt., #, etc.</small> SUITE 1007 <small>City & State</small> West Palm Beach FL		3. Mailing Address 255 EVERNIA ST <small>Suite, Apt., #, etc.</small> SUITE 1007 <small>City & State</small> West Palm Beach FL																											
<small>Zip</small> 33401		<small>Country</small> West Palm Beach		4. FEI Number 02232005 Chg-LLC CR2E083 (10/03) 342025083																									
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable																											
6. Name and Address of Current Registered Agent CEJA, ANGELINA 255 EVERNIA ST SUITE 1007 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent <small>Name</small> Angelina Cesa <small>Street Address (P.O. Box Number is Not Acceptable)</small> 255 EVERNIA ST. <small>City</small> West Palm Beach FL <small>Zip Code</small> 33401																										
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><small>TITLE</small></td> <td style="width: 55%;">MGRM</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td><small>NAME</small></td> <td>CEJA, ANGELINA</td> <td></td> </tr> <tr> <td><small>STREET ADDRESS</small></td> <td>255 EVERNIA ST, SUITE 1007</td> <td></td> </tr> <tr> <td><small>CITY - ST - ZIP</small></td> <td>WEST PALM BEACH, FL 33401</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><small>TITLE</small></td> <td style="width: 55%;"></td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td><small>NAME</small></td> <td></td> <td></td> </tr> <tr> <td><small>STREET ADDRESS</small></td> <td></td> <td></td> </tr> <tr> <td><small>CITY - ST - ZIP</small></td> <td></td> <td></td> </tr> </table> </div> </div>						<small>TITLE</small>	MGRM	<input type="checkbox"/> Delete	<small>NAME</small>	CEJA, ANGELINA		<small>STREET ADDRESS</small>	255 EVERNIA ST, SUITE 1007		<small>CITY - ST - ZIP</small>	WEST PALM BEACH, FL 33401		<small>TITLE</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<small>NAME</small>			<small>STREET ADDRESS</small>			<small>CITY - ST - ZIP</small>		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.																													
SIGNATURE: _____ 3-22-09 (561) 377-7546 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																													