2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090042

Entity Name: MICROGLO, LLC

City-St-Zip:

FILED Jul 07, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Busi	New Principal Place of Business:	
14635 HORSESHOE TRACE SUITE B		1200 S FEDERAL HWY STE 301		
	TON, FL 33414 US	BOYNTON BEACH, FL 3343	5 US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
14635 HORSESHOE TRACE SUITE B		1200 S FEDERAL HWY STE 301		
	TON, FL 33414 US	BOYNTON BEACH, FL 3343	5 US	
	: 20-2087060 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the limited liability compa		ificate of Status Desired ()	
	I Address of Current Registered Agent:	Name and Address of New I	Registered Agent:	
NOVER, BRIAN N 14635 HORSESHOE TRACE SUITE B WELLINGTON, FL 33414 US		MORTON, LINDA L 1200 S FEDERAL HWY STE 301 BOYNTON BEACH, FL 3343:	1200 S FEDERAL HWY	
	e named entity submits this statement for the purpe of Florida.	ose of changing its registered office	or registered agent, or both	
SIGNATURE: LINDA L MORTON			07/07/2005	
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete NOVER, BRIAN N 14635 HORSESHOE TRACE SUITE B WELLINGTON, FL 33414 US	Title: () Char Name: Address: City-St-Zip:	ge () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete JACOBS, BILL A 6006 LAS COLINAS CIRCLE LAKE WORTH, FL 33463 US	Title: () Char Name: Address: City-St-Zip:	ge () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete CRIDER, ROB E 11 ROBERT DRIVE 209 APT. LANCASTER, NY 14086 US	Title: () Char Name: Address: City-St-Zip:	ge () Addition	
Title: Name: Address:	() Delete	Title: MGR () Char Name: MORTON, LINDA L Address: 1200 S FEDERAL HV	ige (X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip: BOYNTON BEACH, FL 33435 FL

SIGNATURE: LINDA L MORTON MGR 07/07/2005