2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000091131

1. Entity Name

IQUE INTELLECTUAL PROPERTIES, LLC

Principal Place of Business

Mailing Address

12802 TAMPA OAKS BOULEVARD SUITE 405

PO BOX 16577 TAMPA, FL 33687

TAMPA, FL 33637



04082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2013630 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

FILED

Apr 10, 2008 08:00 A Secretary of State

6. Name and Address of Current Registered Agent

BARTOLETTA, JOHN J 12802 TAMPA OAKS BOULEVARD SUITE 506 TAMPA, FL 33637

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FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		800000888895 04/22/02-20031-006 138, 75
SIGNATURE	(NOTE: Registered Agent signature required when reinstaling)	DATE
 The above named entity submits this statement for the purpose of chathe obligations of registered agent. 	inging its registered office or registered agent, or bot	n, in the State of Florida. Tam familiar with, and accept.

MANAGING MEMBERS/MANAGERS 9. TITLE NAME BARTOLETTA MANAGEMENT, LLC 12802 TAMPA OAKS BOULEVARD, SUITE 405 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33637 TITLE NAME STREET ADDRESS CITY+ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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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 or the receipter or rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPE UR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE