2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093816

Entity Name: MONO MARKETING LLC

FILED Feb 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

540 NORTH HWY 434 SUITE 144 518 BAYWOOD CT

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

P.O. BOX 163126 P.O. BOX : 161424

ALTAMONTE SPRINGS, FL 32716 ALTAMONTE SPRINGS, FL 32716

FEI Number: 20-2194970 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORADI, MEHRAN
540 NORTH HWY 434 SUITE 144

MORADI, MICHAEL M
518 BAYWOOD CT

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: MICHAEL M. MORADI 02/26/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Name:
 MORADI, MEHRAN
 Name:
 MORADI, MICHAEL M

 Address:
 P.O. BOX 163126
 Address:
 P.O. BOX : 161424

City-St-Zip: ALTAMONTE SPRINGS, FL 32716 City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 NOROUZI, DAVID
 Name:

 Address:
 P.O. BOX 163126
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32716
 City-St-Zip:

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: MICHAEL M. MORADI MGR 02/26/2009