2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 10, 2006 8:00 am Secretary of State DOCUMENT # L05000002625 1. Entity Name 02-10-2006 90169 008 ****50.00 KRIKO LLC Principal Place of Business Mailing Address OUUTIOTO 800 CHURCH ST. 800 CHURCH ST. NOKOMIS, FL 34275 NOKOMIS, FL 34275 CR2E083 (11/05) 01242006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 55-0889084 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KREIDER, THOMAS DO NOT WRITE 800 CHURCH ST. NOKOMIS, FL 34275 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. DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM THILE NAME KREIDER, THOMAS STREET ADDRESS 800 CHURCH ST CITY-ST-7IP NOKOMIS, FL 34275 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Kicko CCC by Thomas Koiler member 1-26-6 941488-4859
DETYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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CITY-\$1-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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