2007 LIMITED LIABILITY COMPANY

SIGNATURE:

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

Mar 08, 2007 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT # L05000007669** 03-08-2007 90190 047 ****50.00 1. Entity Name ME & ME TOO, LLC Principal Place of Business Mailing Address 2813 CAPISTRANO WAY 2813 CAPISTRANO WAY NAPLES, FL 34105 NAPLES, FL 34105 02152007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2283962 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOLDIN, RALPH S DO NOT WRITE 2813 CAPISTRANO WAY NAPLES, FL 34105 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 Signature, typed or profited name of registered agent and title # applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME GOLDIN; RALPH S STREET ADDRESS 2813 CAPISTRANO WAY CITY-ST-ZIP NAPLES, FL 34105 TITLE MGRM MICHETTI, MICHAEL L NAME 2813 CAPISTRANO WAY STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34105 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 outrustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

3-6-07

239-403-8482