2008 LIMITED LIABILITY COMPANY

SIGNATURE:

ANNUAL REPORT FILED **DOCUMENT # L05000019605** Aug 22, 2008 08:00 AM Secretary of State SPANG ENTERPRISES, LLC. Principal Place of Business Mailing Address 1704 E 15TH AVE 1704 E 15TH AVE **TAMPA, FL 33605** TAMPA, FL 33605 08192008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2397250 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPANG, THOMAS P DO NOT WRITE 1704 E 15TH AVE TAMPA,, FL 33605 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. PROSIDOUT SIGNATURE FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. MANAGING MEMBERS/MANAGERS 9. TITLE MGRM SPANG, THOMAS P NAME STREET ADDRESS 1704 E 15TH AVE CITY-ST-7IP TAMPA, FL 33605 TITLE U00000958183 NAME STREET ADDRESS 08/22/08-80002-021 138.75 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SY-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

O MEMBER, OR AUTHO