2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L05000029248

1. Entity Name

FLAMINGO SOFTWARE, LLC

Principal Place of Business

عامرة المنداه

5331 HAMMOCK DR. CORAL GABLES, FL 33156 Mailing Address

DO NOT WRITE IN THIS SPACE

5331 HAMMOCK DR. CORAL GABLES, FL 33156

FILED Mar 17, 2008 08:00 A Secretary of State



01162008 No Chg-LLC

CR2E083 (12/07)

4,	FEI Number
	20-2560555

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

GOLDBERG, MICHAEL C 5331 HAMMOCK DR. CORAL GABLES, FL 33156

the obligations of registered agent.

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IN TH	IS SE	MCE

SIGNATURE	Signature, typed or printed name of registered agent and title if epplicable	(NOTE: Registered Agent signeture required when reinstating)	DATE		
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	P GOLDBERG, MICHAEL C 5331 HAMMOCK DR CORAL SPRINGS, FL 33156				
NAME STREET ADDRESS CITY-ST-ZIP			V000000860530; 04/02/08-80065-017 138:75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IOT-WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IIS SPACE		
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.					

IING MANAGING HEMBER, OF AUTHORIZED REPRESENTATIVE

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