

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034720

Entity Name: CONDARCO LLC

FILED
Jul 15, 2008
Secretary of State

Current Principal Place of Business:

964 TULIP CIR.
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

964 TULIP CIR.
WESTON, FL 33327 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SKLAR, SERGIO E MGR
4642 N HIATUS RD
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

SKLAR, SERGIO E MGR
964 TULIP CIRCLE
WESTON, FL 33327 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: SERGIO SKLAR

07/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SKLAR, SERGIO E
Address: 4642 N HIATUS
City-St-Zip: SUNRISE, FL 33351 US

Title: MGRM () Delete
Name: BOTTELLI, ANDREA L
Address: 4642 N HIATUS
City-St-Zip: SUNRISE, FL 33351 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SKLAR, SERGIO E
Address: 964 TULIP CIRCLE
City-St-Zip: WESTON, FL 33327 US

Title: MGRM (X) Change () Addition
Name: BOTTELLI, ANDREA L
Address: 964 TULIP CIRCLE
City-St-Zip: WESTON, FL 33327 US

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: SERGIO SKLAR

MGR

07/15/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date