2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Mar 03, 2008 08:00 A **DOCUMENT # L05000034962 Secretary of State** WHITE, WHITE & ASSOCIATES LLC Principal Place of Business Mailing Address ONE NE 2ND AVE ONE NE 2ND AVE MIAMIL FL 33132 MIAMI, FL 33132 02272008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-3243008 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITE, OSCAR A DO NOT WRITE ONE NE 2ND AVE MIAMI, FL 33132 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 privated name of registered agent and title if applicable. (NOTE: Registered Agent agneture required when renstating) DATE FILE NOW!!! PEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM NAME WHITE, OSCAR A ONE NE 2ND AVE STREET ADDRESS CITY-ST-ZP MIAMI, FL 33132 MGRM TITLE U000000844613 NAME WHITE, JAY A 03/13/08-80006-004 138.75 STREET ADDRESS ONE NE 2ND AV E CITY-ST-ZIP MIAMI, FL 33132 TITLE MALE STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE MAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 says legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or bustee empowered to skeptile this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP