2008 LIMITED LIABILITY COMPANY

SIGNATURE:

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

FILED **ANNUAL REPORT** Mar 28, 2008 08:00 A DOCUMENT # L05000053670 Secretary of State 1.-Entity Name UAS2 LLC Principal Place of Business Mailing Address 1305 HILL AVENUE 1305 HILL AVENUE MANGONIA PARK, FL 33407 MANGONIA PARK, FL 33407 01112008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2939106 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HACK, GEORGE DO NOT WRITE **4287 HUNTING TRAIL** LAKE WORTH, FL 33467 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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE J00000973275 FILE NOWILL FEE IS \$138.75 04/10/08-80070-024 138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR IME NAME HACK, GEORGE STREET ADDRESS **4287 HUNTING TRAIL** CITY-ST-ZIP LAKE WORTH, FL 33467 TITLE NAME STREET ADDRESS CITY: ST-ZIP. . . NAME ' STREET ADDRESS **DO NOT WRITE** CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 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.