2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# L05000054870

Entity Name: ZONE-IT GROUP, LLC

Current Principal Place of Business:

2705 BRIM WAY
COOPER CITY, FL 33026

New Principal Place of Business:

Current Mailing Address:

2114 N FLAMINGO ROAD
#302
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 20-2971579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANZONE, KATHY
2705 BRIM WAY
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MBR ( ) Delete
Name: FRANZONE, KATHY M
Address: 2705 BRIM WAY
City-St-Zip: COOPER CITY, FL 33026

Title: MBR ( ) Delete
Name: FRANZONE, STEVE M
Address: 2705 BRIM WAY
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES:

Title: D (X) Change ( ) Addition
Name: FRANZONE, KATHY M
Address: 2705 BRIM WAY
City-St-Zip: COOPER CITY, FL 33026

Title: D (X) Change ( ) Addition
Name: FRANZONE, STEVE M
Address: 2705 BRIM WAY
City-St-Zip: COOPER CITY, FL 33026

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: STEVE M FRANZONE D 04/29/2007

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