2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055473

Entity Name: CVISTA, LLC

FILED Feb 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3071 SHOAL CREEK DRIVE 1281 GULF OF MEXICO DRIVE LAKELAND, FL 33803

502

LONGBOAT KEY, FL 34228

Current Mailing Address: New Mailing Address:

P.O. BOX 89359 TAMPA, FL 33689

FEI Number: 20-2988456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LASHKAJANI, HADI B LASHKAJANI, HADI B 3071 SHOAL CREEK DRIVE 1281 GULF OF MEXICO DRIVE LAKELAND, FL 33803 502 LONGBOAT KEY, FL 34228 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: 02/29/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Change () Addition () Delete

TASTESPIRE, INC., Name: Name: Address: P.O. BOX 89359 Address: City-St-Zip: TAMPA, FL 33689 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: LASHKAJANI, HADI B Name: LASHKAJANI, HADI B

Address: 3071 SHOAL CREEK DRIVE Address: 1281 GULF OF MEXICO DRIVE # 502

City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LONGBOAT KEY, FL 34228

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: HADI LASHKAJANI 02/29/2008