

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 05, 2008  
Secretary of State**

DOCUMENT# L05000057638

Entity Name: MANZO ACQUISITIONS, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

C/O SCOTT A. SILVER  
18001 OLD CUTLER ROAD, SUITE 600  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

**New Mailing Address:**

C/O SCOTT A. SILVER  
18001 OLD CUTLER ROAD, SUITE 600  
PALMETTO BAY, FL 33157

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

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

SILVER, SCOTT A  
C/O SILVER, GARVETT & HENKEL, P.A.  
18001 OLD CUTLER ROAD, SUITE 600  
PALMETTO BAY, FL 33157 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title:                      MGRM                      ( ) Delete  
Name:                      MANZO, GENNARO  
Address:                      18001 OLD CUTLER ROAD, SUITE 600  
City-St-Zip:                      PALMETTO BAY, FL 33157

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GENNARO MANZO                      MGRM                      02/05/2008

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