2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED **DOCUMENT # L05000061885** Aug 11, 2008 08:00 AM Secretary of State 3240 HUNTINGTON, LLC Principal Place of Business Mailing Address 13206 FIJI WAY, UNIT A 13206 FIJI WAY, UNIT A MARINA DEL REY, CA 90292 MARINA DEL REY, CA 90292 07242008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALTSCHUL, JOSEPH E DO NOT WRITE 1792 BELL TOWER LANE WESTON, FL 33326 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 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. FILE NOW!!! FEE IS \$138.75 U00000957560 Due by September 12, 2008 08/11/08-80005-016 138.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME GORODNITSKY, IGOR 13206 FIJI WAY, UNIT A STREET ADDRESS MARINA DEL REY, CA 90292 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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.

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MENATURE AND TYPES OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE