

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000090577

FILED
May 01, 2008
Secretary of State**Entity Name:** WONDERFUL PROPERTIES, LIMITED LIABILITY COMPANY**Current Principal Place of Business:**822 RENAISSANCE POINTE
#202
ALTAMONTE SPRINGS, FL 32714**New Principal Place of Business:****Current Mailing Address:**822 RENAISSANCE POINTE
#202
ALTAMONTE SPRINGS, FL 32714**New Mailing Address:****FEI Number:** 20-3476518**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**YEH, MAO SUNG
822 RENAISSANCE POINTE
#202
ALTAMONTE SPRING, FL 32714 US**Name and Address of New Registered Agent:**YEH, WANDA
822 RENAISSANCE POINTE
#202
ALTAMONTE SPRING, FL 32714 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: WANDA YEH

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: YEH, MAO SUNG
Address: 822 RENAISSANCE POINTE, #202
City-St-Zip: ALTAMONTE SPRINGS, FL 32714**Title:** MGRM (X) Delete
Name: YEH, WANDA
Address: 822 RENAISSANCE POINTE, #202
City-St-Zip: ALTAMONTE SPRINGS, FL 32714**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: YEH, WANDA
Address: 822 RENAISSANCE POINTE, #202
City-St-Zip: ALTAMONTE SPRINGS, FL 32714**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: WANDA YEH

MGRM

05/01/2008

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