2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095941

City-St-Zip:

CORAL SPRINGS, FL 33067

Entity Name: INDUSTRIAL MECHANICAL SYSTEMS, LLC

FILED Jan 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3080 NW 99TH WAY #303 CORAL SPRINGS, FL 33067 US **New Mailing Address: Current Mailing Address:** 3080 NW 99TH WAY #303 CORAL SPRINGS, FL 33067 US FEI Number: 20-3547626 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: MOORE & LEE, LLP KORNBLUTH, BRETT 110 E. BROWARD BLVD., 3080 NW 99TH WAY #620 #303 FT. LAUDERDALE, FL 33301 US CORAL SPRINGS, FL 33067 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: BRETT KORNBLUTH 01/11/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete KORNBLUTH, BRETT Name: Name: Address: 3080 NW 99TH WAY, #303 Address: City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: QUINN, ANTHONY Name: Address: 3080 NW 99TH WAY, #303 Address: City-St-Zip: CORAL SPRINGS, FL 33067 US City-St-Zip: Title: CFO () Delete Title: () Change () Addition MULLIGAN, CHAD Name: Name: 3080 NW 99TH WAY, #303 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: BRETT KORNBLUTH P 01/11/2006