

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096928

FILED
May 01, 2008
Secretary of State

Entity Name: COST SEGREGATION SPECIALISTS INTERNATIONAL LLC

Current Principal Place of Business:

2161 PALM BEACH LAKES BOULEVARD
SUITE 450
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

2161 PALM BEACH LAKES BOULEVARD
SUITE 450
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 20-3577066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GOLDBERG, HARVEY B
2161 PALM BEACH LAKES BOULEVARD
SUITE 450
WEST PALM BEACH, FL 33409 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:

Title: MGRM () Delete
Name: INOVA CONSULTING LLC,
Address: 2161 PALM BEACH LAKES BOULEVARD, SUITE 450
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM (X) Delete
Name: QUANTUM ENGINEERING, ASSOCIATES INC .
Address: 2400 HIGH RIDGE ROAD, SUITE 100
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES:

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

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: HARVEY B. GOLDBERG

MGR

05/01/2008

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