

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103170

Entity Name: SHARKTRAK LLC

FILED
Aug 07, 2006
Secretary of State

Current Principal Place of Business:

1409 LINCOLN ROAD, APT 208
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1409 LINCOLN ROAD, APT 208
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-3656739 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:

GREEN, PETER
1409 LINCOLN ROAD, APT 208
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

GREEN, PETER
1508 BAY ROAD APT #227
MIAMI BEACH, FL 33139 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: _____

08/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GREEN, PETER
Address: 1409 LINCOLN ROAD, APT 208
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: BRAUNE, ERIC
Address: 1409 LINCOLN ROAD, APT 208
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GREEN, PETER
Address: 1508 BAY ROAD APT #227
City-St-Zip: MIAMI BEACH, FL 33139

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

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.

SIGNATURE: PETER GREEN

MR.

08/07/2006

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