2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103257

Entity Name: FLOATING LIGHT LLC

Current Principal Place of Business:

FILED Apr 28, 2006 Secretary of State

Date

() Change () Addition

8725 SW 176 STREET 6050 SW 116TH ST. PALMETTO ESTATES, FL 33157 US MIAMI, FL 33156 **Current Mailing Address: New Mailing Address:** P.O. BOX 565175 MIAMI, FL 33256 US FEI Number: 20-3658197 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: DAUGHERTY, CHRISTOPHER DAUGHERTY, CHRISTOPHER R P 8725 SW 176 STREET 8725 SW 176 STREET PALMETTO ESTATES, FL 33157 US PALMETTO ESTATES, FL 33157 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: CHRISTOPHER DAUGHERTY 04/28/2006

New Principal Place of Business:

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES: MGRM Title: () Delete

DAUGHERTY, CHRISTOPHER Name: Name: Address: P.O. BOX 565175 Address: MIAMI, FL 33256 City-St-Zip: City-St-Zip:

Electronic Signature of Registered Agent

Title: MGRM () Delete Title: () Change () Addition

Name: BRADY, PREMAN Name: Address: P.O. BOX 565175 Address: City-St-Zip: MIAMI, FL 33256 City-St-Zip:

Title: () Delete Title: () Change (X) Addition HARLEMAN, MICHAEL B AD Name: Name:

1434 BERKELEY #4 Address: Address: City-St-Zip: City-St-Zip: SANTA MONICA, CA 90404 US

Title: () Delete Title: AD () Change (X) Addition

Name: Name: ATKINS, ALLEN PO BOX 81 Address: Address: City-St-Zip: City-St-Zip: KULA, HI 96790 US

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: MICHAEL HARLEMAN 04/28/2006