2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116026

Entity Name: DATASYS FLORIDA, LLC

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5515 NORLANDER DR.

PORT CHARLOTTE, FL 33981 US

Current Mailing Address: New Mailing Address:

1903 60TH PLACE E. M4120

BRADENTON, FL 34203 US

FEI Number: 98-0479693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACTIVEFILINGS LLC MALACH, VLADIMIR 10651 NE 11 COURT 5515 NORLANDER DR

MIAMI SHORES, FL 33138 US PORT CHARLOTTE, FL 33981 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: VLADIMIR MALACH 01/04/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MALACH, VLADIMIR
 Name:

 Address:
 8345 NW 66TH ST #9117
 Address:

 City-St-Zip:
 MIAMI, FL 33166 US
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 MALACHOVA, ELENA
 Name:

 Address:
 8345 NW 66TH ST #9117
 Address:

 City-St-Zip:
 MIAMI, FL 33166 US
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 MALACHOVA, ELENA
 Name:

 Address:
 8345 NW 66TH ST #9117
 Address:

 City-St-Zip:
 MIAMI, FL 33166 US
 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: VLADIMIR MALACH MGR 01/04/2008