

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121240

Entity Name: ELP INVESTMENTS ,LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

2953 W. CYPRESS CREEK RD
STE 101
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

2953 W. CYPRESS CREEK RD
STE 101
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 20-3978212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASSARIELLO, JOHN
2953 W. CYPRESS CREEK RD STE 101
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: PRES () Delete
Name: ENGELHARDT, SANFORD
Address: 7978 EXETER CIR. EAST
City-St-Zip: TAMARAC, FL 33321 US

Title: VP () Delete
Name: PASSARIELLO, JOHN
Address: 2953 W. CYPRESS CREEK RD STE 101
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: TRES () Delete
Name: LOFRISCO, SAL
Address: 2953 W. CYPRESS CREEK RD STE 101
City-St-Zip: FT LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES:

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

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: JOHN PASSARIELLO

MEMB

04/24/2008

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