

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010898

Entity Name: LONE OPTICS, LLC.

FILED
Jun 08, 2007
Secretary of State

Current Principal Place of Business:

19004 NW 23RD PLACE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

19004 NW 23RD PLACE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 20-4226170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

EDWARDS, KIMBERLY
19004 NW 23RD PLACE
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

DELATTE, LON R
19004 NW 23RD PLACE
PEMBROKE PINES, FL 33029 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: LON DELATTE

06/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EDWARDS, KIMBERLY
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: DELATTE, PATRICIA
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGR (X) Delete
Name: DELATTE, LON R
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGR (X) Delete
Name: EDWARDS, DONALD GENE JR.
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DELATTE, LON
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM (X) Change () Addition
Name: EDWARDS, DONALD GENE JR.
Address: 19004 NW 23RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

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: LON DELATTE

MGRM

06/08/2007

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