

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015239

Entity Name: IN FLA INTERNET CAFE LLC

FILED
Jan 06, 2007
Secretary of State

Current Principal Place of Business:

5209 TIMUQUANA ROAD
SUITE 8
JACKSONVILLE, FL 32210

New Principal Place of Business:

9735 OLD ST. AUGUSTINE ROAD
SUITE 15
JACKSONVILLE, FL 32257

Current Mailing Address:

5209 TIMUQUANA ROAD
SUITE 8
JACKSONVILLE, FL 32210

New Mailing Address:

9735 OLD ST. AUGUSTINE ROAD
SUITE 15
JACKSONVILLE, FL 32257

FEI Number: 76-0817385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATHEWS, KELLY M
5209 TIMUQUANA ROAD
SUITE 8
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

MATHEWS, KELLY M
9735 OLD ST. AUGUSTINE ROAD
SUITE 15
JACKSONVILLE, FL 32257 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: KELLY M MATHEWS

01/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITH, CALVIN T
Address: 10311 ALLENE ROAD
City-St-Zip: JACKSONVILLE, FL 32219

Title: MGRM () Delete
Name: MATHEWS, KELLY M
Address: 10311 ALLENE ROAD
City-St-Zip: JACKSONVILLE, FL 322219

Title: MGRM (X) Delete
Name: PICKETT, MELISSA T
Address: 3367 VOLLEY DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

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 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: KELLY M MATHEWS

MGRM

01/06/2007

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