2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022886

Entity Name: DAKINE INVESTMENTS, LLC

FILED May 30, 2007 Secretary of State

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

964 FLORIDA AVENUE 5536 HANSEL AVE

SUITE # 101 ORLANDO, FL 32809 US ROCKLEDGE, FL 32955 US

Current Mailing Address: New Mailing Address:

PO BOX 560175 PO BOX 540009

ROCKLEDGE, FL 329560175 US MERRITT ISLAND, FL 329540009 US

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

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: Name and Address of New Registered Agent:

MICHAELS, SEAN 964 FLORIDA AVENUE SUITE # 101

UITE#101 ORLANDO, FL 32809 US

ROCKLEDGE, FL 32955 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.

MICHAELS, SEAN

5536 HANSEL AVE

SIGNATURE: SEAN MICHAELS 05/30/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 MICHAELS, SEAN
 Name:
 MICHAELS, SEAN

 Address:
 PO BOX 560175
 Address:
 PO BOX 540009

City-St-Zip: ROCKLEDGE, FL 329560175 US City-St-Zip: MERRITT ISLAND, FL 329540009 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MICHAELS, DONNA M Name: MICHAELS, DONNA M

 Address:
 PO BOX 560175
 Address:
 PO BOX 540009

 City-St-Zip:
 ROCKLEDGE, FL 329560175 US
 City-St-Zip:
 MERRITT ISLAND, FL 329540009 US

Title MODM () Observe (V) Addition

Title: () Delete Title: MGRM () Change (X) Addition Name: BUCHER, JASON

 Name.
 BOCHER, JASON

 Address:
 Address:
 5536 HANSEL AVE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32809 US

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

 Name:
 Name:
 BUCHER, PAMELA

 Address:
 Address:
 5536 HANSEL AVE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32809 US

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: SEAN MICHAELS MGRM 05/30/2007