2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 17, 2008 08:00 A Secretary of State DOC: MENT # L06000025174 1. Entity Name CUZTECH, LLC Principal Place of Business Mailing Address 324 LAKEVIEW DRIVE 324 LAKEVIEW DRIVE CRESTVIEW, FL 32536 CRESTVIEW, FL 32536 CR2E083 (12/07) 03112008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4607850 Not Applicable \$5.00 Additional 5. Certificate of Status Desired -C. Name and Address of Current Registered Agent DO NOT WRITE PERRI, DANIEL C 4 ELEVENTH AVENUE, SUITE ONE SHALIMAR, FL 32579 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable. FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE FREDERIKSEN, THOMAS NAME 324 LAKEVIEW DRIVE STREET ADDRESS CITY-ST-ZIP CRESTVIEW, FL 32536 TITLE NAME STREET ADDRESS CITY - ST - ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes I further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED