2007 LIMITED LIABILITY COMPANY ANNUAL REPORT				<sup>3</sup> May 01, 2007 8:00 Secretary of Stat 03-23-2007 90169 012 ****50.0
1. Entity Na	IMENT # L0600003	32561		03-23-2007 90189 012 **** 30.0
1000 0010	ce of Business AVENUE N, FL 32444	Mailing Address 1000 OHIO AVENUE LYNN HAVEN, FL 32	444	30006299
2. Principal	Place of Business - No P.O. Box #	3. Mailing Address	····	
Suite, Apl	. #, elc.	Suite, Apt. #, etc.	<u> </u>	02262007 Chg-LLC CR2E083 (12/06)
City & Sta	ie	City & State	<u> </u>	4. FEI Number 59-3500568 Not Applied For
Zip	Country	Zip	Country	S. Certificate of Status Desired S.00 Additional Fee Required.
	6. Name and Address of Curre	nt Registered Agent	Name	7. Name and Address of New Registered Agent
MALIK, AMER 122 COTTONWOOD CIRCLE LYNN HAVEN, FL 32444			Street Addres	ss (P.O. Box Number is Not Acceptable)
•·	$\sum$	$\mathbf{r}$	City	FL Zip Code
8. The above the obligation of the second se	ations of registered agent.	A.	·	stered agent, or both, in the State of Florida. I am lamiliar with, and acce
the obliga	Sontaine hyped or geheid name of negatived by Filling Fee is \$50.00 Due by May 1, 2007	A	DTE: Registered Agent algebbre requ	stered agent, or both, in the State of Florida. I am familiar with, and acce 312407 Date Matte check payable to Florida Department of State
the oblige SIGNATURE 9. Title NAME STREET ADDRESS	Sonture, hoad or geliefed event. Sonture, hoad or geliefed event of registered by Filling Poe is \$50.00 Due by May 1; 2007 MANAGING MEM MGRM MALIK, AMER 122 COTTONWOOD CIRCLE	A.	DTE: Registered Agent algebabre requ 10. TITLE NAME STREET ADDRESS	stered agent, or both, in the State of Florida. 1 am familiar with, and acce 3124407 Date Matte check payable to
the obligat SIGNATURE 9. Hitte HAME	Southre, most or pained agent. Southre, most or pained agent. South of the state of registered 20 Managing Mean MGRM MALIK, AMER 122 COTTONWOOD CIRCLE LYNN HAVEN, FL 32444	IN THE PADOREADIN. (MC	DTE: Registered Agent algebaber requ 10. STILE NAME	stered agent, or both, in the State of Florida. I am (amiliar with, and acce 3) DATE Matte check payable to Florida Department of State ADDITIONS/CHANGES
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