

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033882

Entity Name: AMBROZIAK INVESTMENTS, LLC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

6601 GATES POINTE WAY
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

6601 GATES POINTE WAY
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 20-4610359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLANGELO-AMBROZIAK, SUSAN
6601 GATES POINTE WAY
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

AMBROZIAK, SUSAN C
6601 GATES POINTE WAY
RIVERVIEW, FL 33569 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: SUSAN COLANGELO AMBROZIAK

04/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLANGELO-AMBROZIAK, SUSAN
Address: 6601 GATES POINTE WAY
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM () Delete
Name: AMBROZIAK, KRZYSZTOF
Address: 6601 GATES POINTE WAY
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AMBROZIAK, SUSAN C
Address: 6601 GATES POINTE WAY
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM (X) Change () Addition
Name: AMBROZIAK, KRZYSZTOF A
Address: 6601 GATES POINTE WAY
City-St-Zip: RIVERVIEW, FL 33569

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: SUSAN COLANGELO AMBROZIAK

MGRM

04/23/2007

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