2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037567

Entity Name: COSMABELLA, LLC

FILED May 01, 2007 Secretary of State

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

8940 CONROY-WINDERMERE RD ORLANDO, FL 32835

Current Mailing Address: New Mailing Address:

8940 CONROY-WINDERMERE RD ORLANDO, FL 32835

FEI Number: 59-3747410 FEI Number Applied For () FEI Number Not Applicable () 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:

ARABITG, RICHARD M.D. ARABITG, RICHARD M.D. 9734 ENGLISH PINE CT 8940 CONROY WINDERMERE RD WINDERMERE, FL 34786 US ORLANDO, FL 32835

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: RICHARD ARABITG 05/01/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

ARABITG, RICHARD Name: Name: Address: 8940 CONROY-WINDERMERE RD Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: ARABITG, JENNIFER Name: Address: 8940 CONROY-WINDERMERE RD Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

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: RICHARD ARABITG **PRES** 05/01/2007