2008 LIMITED LIABILITY COMPANY ANNUAL REPORT					FILED Feb 01, 2008 8:00 am Secretary of State	
DOCUMENT # L06000043958				02-01-2008 90048 022 ***138.75		
1. Entity Name CBS INVESTMENT PROPERTIES, LLC						
Principal Place of Business Mailing Address 11912 SHELDON ROAD #B 11912 SHELDON ROAD #B TAMPA, FL 33626 TAMPA, FL 33626						
2. Principal Place of Business - No P.O. Box # 3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01252008 Chg-LLC CR2E083 (12/06)	
City & State		City & State			4. FEI Number Applied For 84-1709575 Not Applicable	
Zip	Country	Zip	Country		5 Certificate of Status Desired	
¦	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent	
	SONG SUK ELDON ROAD #B L 33626		Nam Stree City		s (P.O. Box Number is Not Acceptable)	
8. The above	named entity submits this statement for	the purpose of changing its		e or register	ered agent, or both, in the State of Florida. I am familiar with, and accept	
the obligat	ions of registered agent.			-		
SIGNATURE	Signature, typed or printed name of registered agent a	nd title it applicable. INO1	E: Registered Agent si	gnature required	rad when reinstating) DATE	
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9.	MANAGING MEMBE		10.		ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHANG, BONG SUK 11912 SHELDON ROAD #B TAMPA,, FL 33626	🗖 Delele	TITLE NAME STREET ADDRE CITY-ST-ZIP	ss	Change 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHANG, JOHN 11912 SHELDON ROAD #B TAMPA, FL 33626	Delele	TITLE NAME STREET ADDRE CITY-ST-ZIP	ss	🗍 Change 🛄 Addilion	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHANG, CHUNG OK 11912 SHELDON ROAD #B TAMPA, FL 33626	Delete	TITLE NAME STREET ADDRE CITY - ST - ZIP	55	🗋 Change 🔲 Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		🗖 Delete	NTLE NAME STREET ADDRE CITY - ST - ZIP	ss	🗌 Change 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	SS	Change Addition	
TITLE NAME STREET ADORESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRE CITY - ST- ZIP	ss	🗋 Change 🛄 Addilion	
indicated	on this report is true and accurate and bility company or the receiver or truster	hat my signature shall have pempowered to execute this	The same legal of report as require	effect as if m ed by Chapt	1/29/08 813-477-9067	

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