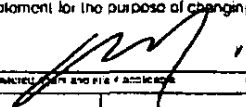
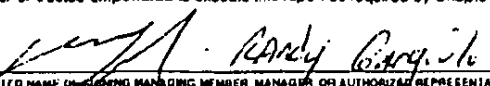


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

03-29-2007 90181 035 ****55.00
L06000045395

DOCUMENT # L06000045395 1. Entity Name CARLY INVESTMENTS, LLC				FILED 07 MAY -8 PM 2:49 SECRETARY OF STATE TALLAHASSEE, FLORIDA 30004020910	
Principal Place of Business RANDY GARGIULO 545 SHELDON AVE STATEN ISLAND NY 10312		Mailing Address RANDY GARGIULO 545 SHELDON AVE STATEN ISLAND NY 10312			
2. Principal Place of Business - No P.O. Box 545 Sheldon Ave		3. Mailing Address 545 Sheldon Ave			
Suite, Apt. #, etc. 8		Suite, Apt. #, etc. 8			
City & State S.I. NY		City & State S.I. NY			
Zip 10312		Zip 10312		4. FEI Number 1st MOORE CR2E083 (10/06)	
Country Richmond		Country Richmond		5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MUTTI, FRANCESCO 2106 N. EAST 15 ST FT. LAUDERDALE FL 33304				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  3-12-07					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS MEMBER RANDY GARGIULO 545 SHELDON AVE STATEN ISLAND NY 10312			10. ADDITIONS/CHANGES ☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
☐ Delete			☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  3-12-07 1-718 984-0865					