2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Jan 23, 2008 08:00 AN Secretary of State **DOCUMENT # L06000045861** BETTY J. SAWICKI, LLC Principal Place of Business Mailing Address 3258 PHILIP AVENUE 2800 DAVIS BLVD SUITE #209 & #210 **BRONX, NY 10465** NAPLES, FL 34112 CR2E083 (12/07) 01122008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1760207 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPENR, JOHN D DO NOT WRITE 9420 BONITA BEACH ROAD, SUITE 100 BONITA SPRINGS, FL 34135-4515 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulared when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000792263 /23/08-80108-021 138.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME SAWICKI, BETTY J 3258 PHILIP AVENUE STREET ADDRESS **BRONX, NY 10465** CITY-ST-ZIP tm e NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-7/P