2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000046254

1. Entity Name



Apr 21, 2008 8:00 am Secretary of State 04-21-2008 90312 042 ***138.75

FILED

NAME STREET ADDRESS CITY-ST-ZIP MGRS MISSBACH, KEVIN NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE MGRS MISSBACH, KEVIN NAME NAME NAME	WEILER BACH & ASSOCIATES LLC.										
Suite, Apt. #. etc. Suite, Apt. #. etc. Suite City & State A. FEI Number 22-3930228 Not Applicable	7410 SAWTE UNIT #2	R CIRCLE	13435 SOUTH MCCALL ROAD, SUITE 216								
City & State City & State City & State City & State City & State A FE Number 22-3930228 New Applicable for 22-3930228 New Applicable New Applicable Part	2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
Zo Country Zip Country 5. Centricate of Status Desired Status Desi	Suite, Apt. #, etc.		Suite, Apt. #, etc.		04092008	Chg-LLC	CR2E08	3 (12/06)			
Country St. Country St. Country St. Centricrate of Status Desired St. 100 Additional Fee Required	City & State		City & State			1					
6. Hame and Address of Current Registered Agent Flischel Murtha & Associate. PA 900 Pinc Street Suite 126 Englewood, FL 34223 City FL Zip Code 8. The above named entity submis this statement for this purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept me obligations of registered agent. SIGNATURE Symbotic Root or protect registered agent. MARK STEET ADDRESS ITTLE MORT MILE MORT MILE MORR MISSBACH, KEVIN MISSBACH	Zip	Country	Zip	Country					5.00 Addi	itional	
Name Street Name Street Stree		6. Name and Address of Current	Registered Agent	_		7. Name and	Address of New		_ 	-	
Suries 126 Englewood, FL 34223 City FL Zin Code 8. The above named entity submits this statement to 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, and the state of Florida. I am familiar with, and accept the obligations of registered agent, and the state of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. INTER NOWILL FLORIDARY (FLORIDARY AGENT) INTER MORES OTH STATE ADDRESS OTH ST	Flischel			Name		Transcription and the second		g	,,,,,		
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