2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056628

Entity Name: HOGS BREATH, LLC

FILED Jul 23, 2007 Secretary of State

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

5015 E HILLSBOROUGH AVE TAMPA, FL 33610

Current Mailing Address: New Mailing Address:

5015 E HILLSBOROUGH AVE TAMPA, FL 33610

FEI Number: 20-5091899 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:

LABARBERA, MICHAEL D 1907 W KENNEDY BLVD TAMPA, FL 33606 US

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:

Name:

Clastronia Cignatura of Dagistarad Agant

Title:

Electronic Signature of Registered Agent

Date

() Change () Addition

MANAGING MEMBERS/MANAGERS:

MGRM () Delete
THOMPSON, LESLIE V
5: 5015 E HILLSBOROUGH AVE

Address: 5015 E HILLSBORO City-St-Zip: TAMPA, FL 33601

Title: MGRM () Delete
Name: THOMPSON, TAMI Y

Address: 5015 E HILLSBOROUGH AVE

City-St-Zip: TAMPA, FL 33601

Title: MGRM () Delete

Name: BASHOR, THOMASENA L
Address: 4809 EHRLICH ROAD STE 203

City-St-Zip: TAMPA, FL 33624

Title: MGRM () Delete Name: KOCSIS, BRIAN S

Address: 5015 E HILLSBOROUGH AVE

City-St-Zip: TAMPA, FL 33601

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: THOMPSON, LESLIE V Address: 5015 E HILLSBOROUGH AVE

City-St-Zip: TAMPA, FL 33610

Title: MGRM (X) Change () Addition

Name: THOMPSON, TAMI Y Address: 5015 E HILLSBOROUGH AVE

City-St-Zip: TAMPA, FL 33610

Name: Address:

City-St-Zip:

Title: MGRM

Title: MGRM (X) Change () Addition Name: KOCSIS, BRIAN S

Address: 5015 E HILLSBOROUGH AVE

City-St-Zip: TAMPA, FL 33610

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: THOMASENA BASHOR MGRM 07/23/2007