2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 10, 2008 8:00 am Secretary of State **DOCUMENT # L06000061586** 01-28-2008 90074 002 ***138.75 1. Entity Name FLOGEO NORTH, LLC Principal Place of Business Mailing Address <u>~~~~~555</u> 14025 N.W. 60TH AVENUE 14025 N.W. 60TH AVENUE MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014 01182008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 32-1785649 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ABBATE, FLORIO DO NOT WRITE 14025 N.W. 60TH AVENUE MIAMI LAKES, FL 33014 IN THIS SPACE 8. The above named antity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am lamitiar with, and accept the obligations of registered agent. 3/1/08 SIGNATURE. (NQTE: Registered Agent signiture required ween renaisting) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE NAME CAVALLARO, GEORGE STREET ADDRESS 14025 N.W. 60TH AVENUE CITY-ST-ZIP MIAMI LAKES, FL 33014 TITLE NAME STREET ADDRESS CITY-ST-719 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE STREET ADORESS CITY-ST-ZP HILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP bled with this filing does not qualify for the exemptions contained in Chapter 119, Floride Statutes. I further certify that the information are 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information sup indicated on this report is true and acrit limited liability company or the recei 305 362 0100 SIGNATURE: 🖄 ITED NAME OF BIGHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIV

FILED