

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061900

Entity Name: HOOKS UNLIMITED LLC

FILED
Apr 29, 2007
Secretary of State

Current Principal Place of Business:

1400 NE 57TH COURT #203
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

1418 NE 18TH AVE.
FORT LAUDERDALE, FL 33304

Current Mailing Address:

1400 NE 57TH COURT #203
FORT LAUDERDALE, FL 33334

New Mailing Address:

1418 NE 18TH AVE
FORT LAUDERDALE, FL 33304

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
773 4TH AVENUE NORTH SUITE E
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: HOY, KEVIN K
Address: 1400 NE 57TH COURT #203
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: T () Delete
Name: WIRTEL, JOSEPH P
Address: 1400 NE 57TH COURT #203
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: HOY, KEVIN K
Address: 1418 NE 18TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: T (X) Change () Addition
Name: WIRTEL, JOSEPH P
Address: 1418 NE 18TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

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: JOSEPH WIRTEL

TRES

04/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date