

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070762

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: AFCON INVESTMENTS LLC

**Current Principal Place of Business:**

4410 NORTH LOIS AVE.  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

4410 NORTH LOIS AVE.  
TAMPA, FL 33614

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VOSLOO, ARNOLDUS J  
Address: 4410 NORTH LOIS AVE.  
City-St-Zip: TAMPA, FL 33614

Title: MGR ( ) Delete  
Name: VOSLOO, TRUDIE  
Address: 4410 NORTH LOIS AVE.  
City-St-Zip: TAMPA, FL 33614

Title: S ( ) Delete  
Name: VOSLOO, TRUDIE  
Address: 4410 NORTH LOIS AVE.  
City-St-Zip: TAMPA, FL 33614

Title: T ( ) Delete  
Name: VOSLOO, ARNOLDSU J  
Address: 4410 NORTH LOIS AVE.  
City-St-Zip: TAMPA, FL 33614

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TRUDIE VOSLOO

MRS

07/09/2007

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