

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086927

Entity Name: POWERGADGETS, LLC

FILED
Jan 16, 2008
Secretary of State

Current Principal Place of Business:

5901 BROKEN SOUND PARKWAY, SUITE 400
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

5901 BROKEN SOUND PARKWAY, SUITE 400
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 51-0601364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, RENE G P
5901 BROKEN SOUND PARKWAY NW
SUITE 400
BOCA RATON, FL 33487 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: GARCIA, RENE G P
Address: 5901 BROKEN SOUND PKWY SUITE 400
City-St-Zip: BOCA RATON, FL 33487 US

Title: VP () Delete
Name: CEGARRA, JUAN C VP
Address: 5901 BROKEN SOUND PKWY SUITE 400
City-St-Zip: BOCA RATON, FL 33487 US

Title: S () Delete
Name: ARRESE-IGOR, FELIX SECRETA
Address: 5901 BROKEN SOUND PKWY SUITE 400
City-St-Zip: BOCA RATON, FL 33487 US

Title: T () Delete
Name: PADRON, FRANCISCO TREASU
Address: 5901 BROKEN SOUND PKWY SUITE 400
City-St-Zip: BOCA RATON, FL 33487 US

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: RENE GARCIA

P

01/16/2008

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