2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

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Entity Name: WYTEK SERVICES, LLC

Current Principal Place of Business:

1066 BLOOMINGDALE AVENUE
VALRICO, FL 33594

New Principal Place of Business:

1066 BLOOMINGDALE AVENUE
VALRICO, FL 33596

Current Mailing Address:

1066 BLOOMINGDALE AVENUE
VALRICO, FL 33594

New Mailing Address:

1066 BLOOMINGDALE AVENUE
VALRICO, FL 33596

FEI Number: 20-5547537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALFONSO, SUZETTE
3111 WEST MLK, JR. BLVD
100
TAMPA, FL 33607 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: MGRM ( ) Delete
Name: WIGH, DANIEL A
Address: 1914 RAVEN MANOR DRIVE
City-St-Zip: DOVER, FL 33527

Title: MGRM ( ) Delete
Name: WIGH, NICOLA P
Address: 1914 RAVEN MANOR DRIVE
City-St-Zip: DOVER, FL 33527

Title: MGRM (X) Delete
Name: WIGH, RICHARD A
Address: 2011 WHISPERING SANDS COURT
City-St-Zip: DOVER, FL 33527

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:

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: DANIEL A. WIGH MGRM 04/30/2008

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