

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091841

FILED
Aug 24, 2007
Secretary of State

Entity Name: RAGE ENTERPRISES, LLC

Current Principal Place of Business:

304 E. SOUTH STREET
SUITE 6024
ORLANDO, FL 32801 US

New Principal Place of Business:

155 S. COURT AVE.
SUITE 1308
ORLANDO, FL 32801 US

Current Mailing Address:

P.O. BOX 22
WINTER PARK, FL 32790 US

New Mailing Address:

155 S. COURT AVE.
SUITE 1308
ORLANDO, FL 32801 US

FEI Number: 20-5629258 FEI Number Applied For () FEI Number Not Applicable () 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:

GUADALUPE, FELIXON A
304 E. SOUTH STREET
SUITE 6024
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GUADALUPE, FELIXON A MR.
155 S. COURT AVE.
SUITE 1308
ORLANDO, FL 32801 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: FELIXON A. GUADALUPE

08/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GUADALUPE, FELIXON A
Address: 304 E. SOUTH STREET, UNIT 6024
City-St-Zip: ORLANDO, FL 32801 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GUADALUPE, FELIXON A MR.
Address: 155 S. COURT AVE., SUITE 1308
City-St-Zip: ORLANDO, FL 32801 US

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: FELIXON A. GUADALUPE

MGR

08/24/2007

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