

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000097715

Entity Name: NIGHTCAP HOLDINGS LLC

FILED
Apr 16, 2007
Secretary of State

Current Principal Place of Business:

4474 ENDERS STREET
ORLANDO, FL 32814

New Principal Place of Business:

4882 NEW BROAD STREET
ORLANDO, FL 32814

Current Mailing Address:

PO BOX 1668
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 20-8413121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURRUEZO, CARLOS J
1250 LINCOLN PLAZA
300 SOUTH ORANGE AVENUE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

BURRUEZO, CARLOS J
4882 NEW BROAD STREET
ORLANDO, FL 32814 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: CARLOS J BURRUEZO

04/16/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BURRUEZO, CARLOS J
Address: 4474 ENDERS STREET
City-St-Zip: ORLANDO, FL 32814

Title: MGR () Delete
Name: MEDINA, BERTHA L
Address: 4474 ENDERS STREET
City-St-Zip: ORLANDO, FL 32814

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BURRUEZO, CARLOS J
Address: 4882 NEW BROAD STREET
City-St-Zip: ORLANDO, FL 32814

Title: MGR (X) Change () Addition
Name: MEDINA, BERTHA L
Address: 4882 NEW BROAD STREET
City-St-Zip: ORLANDO, FL 32814

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS J BURRUEZO

MGRM

04/16/2007

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