2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# L06000098118

Entity Name: ADRENALINE ENTERPRISES, LLC

Current Principal Place of Business:

28 WEST FLAGLER STREET
COURTHOUSE PLAZA, SUITE 500
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

28 WEST FLAGLER STREET
COURTHOUSE PLAZA, SUITE 500
MIAMI, FL 33130

New Mailing Address:

FEI Number: 36-4595345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMADO, MARTA
28 WEST FLAGLER STREET
COURTHOUSE PLAZA, SUITE 500
MIAMI, FL 33130 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: AMADO, MARTA
Address: 28 WEST FLAGLER STREET # 500
City-St-Zip: MIAMI, FL 33130

Title: MGRM ( ) Delete
Name: MAGNORSKY, FEDERICO
Address: 28 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM ( ) Change (X) Addition
Name: MAGNORSKY, JENNIFER
Address: 28 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

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: MARTA AMADO MGRM 02/08/2007

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