2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# L06000106275

Entity Name: BRITT'S WELDING, LLC

Current Principal Place of Business:

238 S. DIXIE HIGHWAY E.
1M
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

2200 N. FEDERAL HWY.
SUITE 201
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 61-1513112 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CALVARESE PROFESSIONAL ACCOUNTING
2200 N. FEDERAL HWY.
SUITE 201
BOCA RATON, FL 33431 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: MGR ( ) Delete
Name: BRITTON, ELIZABETH
Address: 238 S. DIXIE HWY. E.
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: MGR ( ) Delete
Name: BRITTON, CHARLES
Address: 238 S. DIXIE HWY E.
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: MGR ( ) Delete
Name: WILSON, BRIAN S
Address: 2200 N. FEDERAL HWY #201
City-St-Zip: BOCA RATON, FL 33431 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:

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: ELIZABETH BRITTON MM 04/27/2007

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