


FILED
Mar 19, 2008 8:00 am
Secretary of State

02-26-2008 90036 010 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

| | |
|--------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # L06000117279 1. Entity Name CAIR, LLC |  |
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|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Principal Place of Business 5205 26TH STREET WEST SUITE B BRADENTON, FL 34207 US | Mailing Address 5205 26TH STREET WEST SUITE B BRADENTON, FL 34207 US |
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01242008 No Chg-LLC CR2E083 (12/07)

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|-----------------------------------------------------------|--------------------------------|
| 4. FEI Number 20-8020283 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

CARLTON, JOE L
5205 26TH STREET WEST
SUITE B
BRADENTON, FL 34207

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

| | |
|------------------------------------------------|--------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM QUALITATIVE RESEARCH CORP 5205 26TH STREET WEST, SUITE B BRADENTON, FL 34207 |
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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 Joe L. Carlton JOE L CARLTON 863-773-4800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #