

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118718

FILED
Aug 01, 2007
Secretary of State

Entity Name: SUNGO, LLC

Current Principal Place of Business:

20336 HACIENDA CRT.
BOCA RATON, FL 33498 US

New Principal Place of Business:

4651 S.R. 7
BLDG.C UNIT 11
CORAL SPRINGS, FL 33067 US

Current Mailing Address:

20336 HACIENDA CRT.
BOCA RATON, FL 33498 US

New Mailing Address:

4651 S.R.7
BLDG. C UNIT 11
CORAL SPRINGS, FL 33067 US

FEI Number: 16-1781423 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:

BOROWSKY, BELINDA
20336 HACIENDA CRT.
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

BOROWSKY, BELINDA
20336 HACIENDA CT.
BOCA RATON, FL 33498 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:

08/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOROWSKY, BELINDA
Address: 20336 HACIENDA CRT.
City-St-Zip: BOCA RATON, FL 33498 US

Title: MGRM () Delete
Name: WRIGHT-CLARK, PETER
Address: PO BOX 135
City-St-Zip: WILSON, WY 83014 US

ADDITIONS/CHANGES:

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: BELINDA BOROWSKY

MS.

08/01/2007

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