

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119282

Entity Name: SMART BUDGET, LLC

FILED  
May 17, 2007  
Secretary of State

## Current Principal Place of Business:

7337 SPRING VILLAS CIRCLE  
ORLANDO, FL 32819 US

## New Principal Place of Business:

10614 WHITMAN CIRCLE  
ORLANDO, FL 32821 US

## Current Mailing Address:

7337 SPRING VILLAS CIRCLE  
ORLANDO, FL 32819 US

## New Mailing Address:

10614 WHITMAN CIRCLE  
ORLANDO, FL 32821 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
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:

FERREIRA, LUIZ A MR.  
7337 SPRING VILLAS CIRCLE  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

FERREIRA, LUIZ A MR.  
10614 WHITMAN CIRCLE  
ORLANDO, FL 32821 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: LACF

05/17/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FERREIRA, LUIZ A MR.  
Address: 7337 SPRING VILLAS CIRCLE  
City-St-Zip: ORLANDO, FL 32819 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FERREIRA, LUIZ A MR.  
Address: 10614 WHITMAN CIRCLE  
City-St-Zip: ORLANDO, FL 32821 US

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: LACF

MGRM

05/17/2007

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