2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015535

Entity Name: HOPS INTERNATIONAL LLC

835 PASADENA AVENUE

LONGWOOD, FL 32750

Address:

City-St-Zip:

FILED Mar 31, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11 SLEEPY HOLLOW COVE LONGWOOD, FL 32750 **Current Mailing Address: New Mailing Address:** 11 SLEEPY HOLLOW COVE LONGWOOD, FL 32750 FEI Number: 14-1989812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALSH, CHARLES TYRE 11 SLEÉPY HOLLOW COVE LONGWOOD, FL 32750 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WALSH, CHARLES TYRE Name: Name: 11 SLEEPY HOLLOW COVE Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WALSH, TERRY LEE Name: Name: Address: 11 SLEEPY HOLLOW COVE Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WALSH, C. CHRISTOPHER Name: Name: Address: 11 SLEEPY HOLLOW COVE Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WALSH, WILLIAM THOMAS Name: WALSH, WILLIAM THOMAS Address: 307 HELENA COURT Address: 951 WABERLY DRIVE City-St-Zip: SANFORD, FL 32773 City-St-Zip: LONWOOD, FL 32750 Title: MGRM () Delete Title: () Change () Addition WALSH, MISTY MICHELLE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CHARLES T. WALSH PRES 03/31/2008