

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033722

FILED
Mar 31, 2008
Secretary of State

Entity Name: PUMP IT UP, LLC

Current Principal Place of Business:

1642 MEDICAL LANE
SUITE A
FORT MYERS, FL 33907 US

New Principal Place of Business:

7050 WINKLER RD
SUITE 101
FORT MYERS, FL 33919 US

Current Mailing Address:

1642 MEDICAL LANE
SUITE A
FORT MYERS, FL 33907 US

New Mailing Address:

25 CARROTWOOD CT
FORT MYERS, FL 33919 US

FEI Number: 26-0143242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, HAL
1642 MEDICAL LANE
SUITE A
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

SHERRY, MARKUS MGRM
25 CARROTWOOD CT
FORT MYERS, FL 33919 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: MARKUS SHERRY

03/31/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHERRY, MARKUS DMD
Address: 1642 MEDICAL LANE, SUITE A
City-St-Zip: FORT MYERS, FL 33907 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHERRY, MARKUS DMD
Address: 25 CARROTWOOD CT
City-St-Zip: FORT MYERS, FL 33919 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: MARKUS SHERRY

MGRM

03/31/2008

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