

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035339

Entity Name: ZERO POINT, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

2026 ASHLEY OAKS CIRCLE
SUITE 102
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

603 S NEWPORT AVE
SUITE 2
TAMPA, FL 33606

Current Mailing Address:

2026 ASHLEY OAKS CIRCLE
SUITE 102
WESLEY CHAPEL, FL 33543

New Mailing Address:

603 S NEWPORT AVE
SUITE 2
TAMPA, FL 33606

FEI Number: 20-8795497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOLI, ADA M
213 S ALBANY AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

LOLI, ADA M
603 S NEWPORT AVE
STE 2
TAMPA, FL 33606 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: ADA LOLI

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOLI, ADA M
Address: 2026 ASHLEY OAKS CIRCLE SUITE 102
City-St-Zip: WESLEY CHAPEL, FL 33543 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LOLI, ADA M
Address: 603 S NEWPORT AVE #2
City-St-Zip: TAMPA, FL 33606 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: ADA LOLI

MGR

04/29/2008

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