

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036710

FILED
Jun 13, 2008
Secretary of State

Entity Name: ADVANTAGE ENERGY SYSTEMS LLC

Current Principal Place of Business:

178 CARIBBEAN DRIVE EAST
SUMMERLAND KEY, FL 33042

New Principal Place of Business:

Current Mailing Address:

178 CARIBBEAN DRIVE EAST
SUMMERLAND KEY, FL 33042

New Mailing Address:

FEI Number: 22-3962857 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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

PRAH, GLENN D MANAGER
178 CARIBBEAN DRIVE EAST
SUMMERLAND KEY, FL 33042 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: GLENN D. PRAH

06/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PRAH, GLENN D
Address: 178 CARIBBEAN DRIVE EAST
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: ST () Delete
Name: PRAH, GLENN D
Address: 178 CARIBBEAN DRIVE EAST
City-St-Zip: SUMMERLAND KEY, FL 33042

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: GLENN D. PRAH

MGR

06/13/2008

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