

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000092103

Entity Name: ZUGIDOME, LLC

FILED
Jul 27, 2008
Secretary of State

Current Principal Place of Business:

17000 NORTH BAY ROAD #1608
SUNNY ISLES, FL 33160

New Principal Place of Business:

17150 NORTH BAY ROAD #2109
SUNNY ISLES, FL 33160

Current Mailing Address:

17000 NORTH BAY ROAD #1608
SUNNY ISLES, FL 33160

New Mailing Address:

17150 NORTH BAY ROAD #2109
SUNNY ISLES, FL 33160

FEI Number: FEI Number Applied For (X) 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:

WOOLFSON, JONATHAN
17000 NORTH BAY ROAD #1608
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

WOOLFSON, JONATHAN
17150 NORTH BAY ROAD #2109
SUNNY ISLES, FL 33160 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: JONATHAN WOOLFSON

07/27/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WOOLFSON, JONATHAN
Address: 17000 NORTH BAY ROAD #1608
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WOOLFSON, JONATHAN
Address: 17150 NORTH BAY ROAD #2109
City-St-Zip: SUNNY ISLES, FL 33160

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: JONATHAN WOOLFSON

MGR

07/27/2008

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