

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094046

Entity Name: CYBER PAL CAFE, LLC

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

32700 U.S. HWY 19 NORTH, SUITE B  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

443 PENT STREET  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

FEI Number: 26-0851603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SKWARA, ZBIGNIEW  
443 PENT STREET  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM (X) Delete  
Name: TYACKE, ROBERT  
Address: 5433 SOUTH VERSAILLES  
City-St-Zip: AURORA, CO 80015

Title: MGRM ( ) Delete  
Name: AKINYEMI, AKINTOLA  
Address: 3753 SOUTH DAYTON WAY  
City-St-Zip: AURORA, CO 80014

Title: MGRM ( ) Delete  
Name: JANOWSKI, CHRIS  
Address: P.O. BOX 97  
City-St-Zip: DUMONT, CO 80436

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHRIS JANOWSKI

MGRM

04/25/2008

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