2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008
Secretary of State

DOCUMENT# L07000099596

Entity Name: GUNG-HO INVESTMENTS L.L.C.

Current Principal Place of Business:

1329 FETTER WAY
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

1329 FETTER WAY
WINTER GARDEN, FL 34787

New Mailing Address:

PO BOX 784403
WINTER GARDEN, FL 34778

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RIECK, AARON M
1329 FETTER WAY
WINTER GARDEN, FL 34787 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: MGR ( ) Delete
Name: TSATIRIS, GEORGE
Address: 114 SKYLINE BLVD.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: MGR ( ) Delete
Name: TSATIRIS, IRENE
Address: 1329 FETTLER WAY
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM (X) Delete
Name: RIECK, AARON
Address: 1329 FETTER WAY
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: RIECK, AARON M
Address: 1329 FETTLER WAY
City-St-Zip: WINTER GARDEN, FL 34787

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: AARON RIECK MGRM 02/25/2008

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