2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102502

Entity Name: ABSOLUTE INSTALLS L.L.C.

FILED Sep 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7490 SHAWDOW BAY DR. 6402 LENAWEE ST

PANAMA CITY, FL 32404 PANAMA CITY, FL 32404

Current Mailing Address: New Mailing Address:

7490 SHAWDOW BAY DR. 6402 LENAWEE ST

PANAMA CITY, FL 32404 PANAMA CITY, FL 32404

FEI Number: 45-0576823 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: Name and Address of New Registered Agent:

FAGER, JAIME
7490 SHAWDOW BAY DR.
HOWES, ALLEN
6402 LENAWEE ST

PANAMA CITY, FL 32404 US PANAMA CITY, FL 32404 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: ALLEN HOWES 09/14/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HOWES, ALLEN
 Name:

 Address:
 6402 LENAWEEE ST.
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32404
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 FAGER, JAIME
 Name:

 Address:
 7490 SHAWDOW BAY DR.
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32404
 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: JAIME FAGER MGRM 09/14/2008