2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110900

Entity Name: KILLER CROME AND BODY LLC

FILED Jul 11, 2008 Secretary of State

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

2651 N. DESIGN CT. SANFORD, FL 32773 US

Current Mailing Address: New Mailing Address:

2651 N. DESIGN CT. SANFORD, FL 32773 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

GANTT, ANGELA H
C/O A.H. GANTT CPA, 3359 W. VINE ST
104

NADIN, BARRIE
2651 N DESIGN CRT
SANFORD, FL 32773 US

KISSIMMEE, FL 34741 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: BARRIE NADIN 07/11/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 BLUE SKIEZ LLC,
 Name:

 Address:
 1349 CASTLEPORT RD
 Address:

 City-St-Zip:
 WINTER GARDEN, FL 34787 US
 City-St-Zip:

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

 Name:
 NADINE, BARRY
 Name:
 NADIN, BARRIE

 Address:
 585 RIDGELINE RUN
 Address:
 585 RIDGELINE RUN

 City-St-Zip:
 LONGWOOD, FL 32750 US
 City-St-Zip:
 LONGWOOD, FL 32750 US

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

 Name:
 JACOBS, THEODORE A
 Name:

 Address:
 11112 AUTUMN WIND LOOP
 Address:

 City-St-Zip:
 CLERMONT, FL 34711 US
 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: BARRIE NADIN MGRM 07/11/2008