2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

4

FILED
May 05, 2008 8:00 am
Secretary of State

04-07-2008 90223 026 ***138.75

DOCUMENT # L07000114264

1. Entity Name
MALAKIA PROPERTIES, LLC

Principal Place of Business
750 N. ATLANTIC AVENUE, UNIT 702
COCOA BEACH, FL 32931

Mailing Address
750 N. ATLANTIC AVENUE, UNIT 702
COCOA BEACH, FL 32931

30005716

01092008 -- Chg-LLC -- CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
750 N. atl ave	750 N. atl ave
Suite, Apt. #, etc. 702	Suite, Apt. #, etc. 702
City & State Cocoa Beach	City & State FL
Zip 32931 Country Brevard	Zip 32931 Country Brevard

4. FEI Number 26-170-5124 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAILEY, MARGARET E
750 N. ATLANTIC AVENUE, UNIT 702
COCOA BEACH, FL 32931

7. Name and Address of New Registered Agent

Name ~~Malakia Properties LLC~~ Margaret E Dailey
Street Address (P.O. Box Number is Not Acceptable) 750 N. Atlantic Ave # 702
City Cocoa Beach FL Zip Code 32931

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE M Dailey ~~MALAKIA PROPERTIES LLC~~ ~~M DAILEY MGR~~ MN
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Margaret E Dailey

FILE NOW!!! FEE IS $138.75
~~After May 1, 2008 Fee will be $538.75~~

Make check payable to Florida Department of State

9.	MANAGING MEMBERS/MANAGERS		10.	ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MDMM DAILEY, MARGARET E MDMM 750 N. ATLANTIC AVENUE, UNIT 702 COCOA BEACH, FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: M Dailey Malakia Properties LLC Margaret E Dailey 3/08 321 799 9140
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #