

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000791

Entity Name: PENGUINTEK, L.L.C.

FILED
Jul 03, 2005
Secretary of State

Current Principal Place of Business:

3948 SOUTH 3RD STREET, SUITE 151
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

3948 SOUTH 3RD STREET, SUITE 151
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3557058 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:

JOHN MCE. MILLER
333 FIRST ST. N, SUITE 305
JACKSONVILLE BEACH, FL 32250 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 () Delete
Name: LEONARD SCOTT FREUDE, NTHAL
Address: 3948 SOUTH 3RD STREET, SUITE 151
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGRM () Delete
Name: CHERYL ANN FREUDENTH, AL
Address: 3948 SOUTH 3RD STREET, SUITE 151
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: LEONARD SCOTT FREUDENTHAL

MGRM

07/03/2005

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