2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001020

Entity Name: AOUADI DREAMS, L.C.

City-St-Zip:

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1350 ALTERNATE A1A JUPITER, FL 33469 **Current Mailing Address: New Mailing Address:** 1350 ALTERNATE A1A JUPITER, FL 33469 FEI Number: 65-0898152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATRICIA, AOUADI 1350 ALTÉRNATE AIA JUPITER, FL 33469 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete AOUADI, TARK Name: Name: Address: 1350 ALTERNATE A1A Address: City-St-Zip: JUPITER, FL 33469 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: AOUADI, PATRICIA Name: Address: 1350 ALTERNATE A1A Address: City-St-Zip: JUPITER, FL 33469 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition AOUADI, JULIETTE F Name: Name: 1350 ALTERNATE A1A Address: Address: City-St-Zip: City-St-Zip: JUPITER, FL 33469 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: FISCHETTI, KRISTINE A Address: Address: 1350 ALTERNATE A1A

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

JUPITER, FL 33469

SIGNATURE: PATRICIA G AOUADI M 01/05/2007