2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000002872

1. Entity Name

BIT INVESTMENT TWENTY-FIVE, LLC



Principal Place of Business

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201 Mailing Address

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201

FILED May 14, 2007 8:00 am Secretary of State

05-14-2007 90368 045 ****50.00



DO NOT WRITE IN THIS SPACE

O1112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 94-3413294 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HIQ CORPORATE SERVICES 1574 VILLAGE SQUARE BLVD SUITE 100 TALLAHASSEE, FL 32309

NAME STREET ADDRESS CITY-ST-ZIP

DO NO	N TC	/RI	TΕ
		. 4.3	
IN THI	2 21	Ͻ Δ(` F
11.4	O Oi	~~	<u>_</u>

8. The above the obligat	named entity submits this statement for the purpose of changions of registered agent.	ing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and life if applicable.	(NOTE: Registered Agen) signature required when reinstating) DATE	
F	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
TITLE NAME	MGRM MERCANTILE-SAFE DEPOSIT & TRUST COMPANY		
STREET ADDRESS	2 HOPKINS PLAZA, SUITE 804		
CITY-ST-ZP	BALTIMORE, MD 21201		
TITLE			
NAME			
STREET ADDRESS CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE	
CITY-SI-ZIP		DO NOT WRITE	
TITLE		IN THIS SPACE	
NAME STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS CITY+ST-ZIP			
TITLE			
HILE		■# ** * * * * * * * * * * * * * * * * *	

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 timited liability company or the receiver or trustee expressed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE DE DOS POR COUNTRIS CHUMBLIS

(40)237-5424

Dayture