

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000113

Entity Name: MENLO WORLDWIDE SERVICES, LLC

FILED
Mar 14, 2005
Secretary of State

Current Principal Place of Business:

3240 HILLVIEW AVENUE
PALO ALTO, CA 94304

New Principal Place of Business:

Current Mailing Address:

3240 HILLVIEW AVENUE
PALO ALTO, CA 94304

New Mailing Address:

FEI Number: 47-0904235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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/MEMBERS:

Title: MGR () Delete
Name: CAZARES, ARTURO
Address: ONE LAGOON DRIVE #400
City-St-Zip: REDWOOD CITY, CA 94065

Title: MGR (X) Delete
Name: ROCHELEAU, JOHN H
Address: ONE LAGOON DRIVE #400
City-St-Zip: REDWOOD CITY, CA 94065

Title: MGR (X) Delete
Name: WILLIFORD, JOHN H
Address: ONE LAGOON DRIVE #400
City-St-Zip: REDWOOD CITY, CA 94065

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MENLO WORLDWIDE, LLC,
Address: ONE LAGOON DRIVE #400
City-St-Zip: REDWOOD CITY, CA 94065

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: JENNIFER W PILEGGI

SEC

03/14/2005

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