2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2005
Secretary of State

DOCUMENT# M03000001051

Entity Name: INTERNATIONAL SOURCING GROUP, LLC

Current Principal Place of Business:

2075 RANGE ROAD
CLEARWATER, FL 33765

New Principal Place of Business:

4600 140TH AVE NORTH
SUITE 210
CLEARWATER, FL 33762

Current Mailing Address:

2075 RANGE ROAD
CLEARWATER, FL 33765

New Mailing Address:

4600 140TH AVE NORTH
SUITE 210
CLEARWATER, FL 33762

FEI Number: 51-0452323 **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:

MARSHALL, VIVIAN
2075 RANGE ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

MARSHALL, VIVIAN
4600 140TH AVE NORTH
SUITE 210
CLEARWATER, FL 33762 US

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: _____ 07/07/2005
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: PETERSON, CRISTEN R
Address: 2075 RANGE ROAD
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: PETERSON, CRISTEN R
Address: 4600 140TH AVE NORTH SUITE 210
City-St-Zip: CLEARWATER, FL 33762

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: CRISTIN R. PETERSON PRES 07/07/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date