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Feb 28, 2005 8:00 am
Secretary of State
01-24-2005 90103 010 ****50.00

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2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000001702

1. Entity Name
LEAD SYSTEMS, LLC

30000699

Principal Place of Business	Mailing Address
7469 W LAKE MEAD BLVD, STE 200 LAS VEGAS, NV 89128	7469 W LAKE MEAD BLVD, STE 200 LAS VEGAS, NV 89128

01192005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. #327
City & State	City & State Tampa FL
Zip / Country	Zip 33606 / Country

4. FEI Number 20-0826820 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HYDE, CHRISTINE ~~1108 W KENNEDY BLVD~~ ~~TAMPA, FL 33606~~	Name Same name Street Address (P.O. Box Number is Not Acceptable) 301 W. Platt St. #327 City Tampa FL Zip Code 33606

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Christine Hyde 1/19/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HERNDON, TIMOTHY R 1108 W KENNEDY BLVD TAMPA, FL 33606	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Herndon, Curtis 301 W. Platt St. #327 Tampa FL 33606	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing Member Hyde, Christine 301 W. Platt St. #327 Tampa FL 33606	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing Member Gilman, Leonard 301 W. Platt St. #327 Tampa, FL 33606	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Timothy R. Herndon 1/19/05 813 254 1439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #