

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002971

FILED
Apr 25, 2007
Secretary of State

Entity Name: DUO-REGEN TECHNOLOGIES, LLC

Current Principal Place of Business:

36181 EAST LAKE ROAD, SUITE #145
PALM HARBOR, FL 346853142

New Principal Place of Business:

Current Mailing Address:

36181 EAST LAKE ROAD, SUITE #145
PALM HARBOR, FL 346853142

New Mailing Address:

FEI Number: 20-2163093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANDE, PAUL
36181 EAST LAKE ROAD, SUITE #145
PALM HARBOR, FL 346853142 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/MANAGERS:

Title: MGRM () Delete
Name: GRANDE, PAUL
Address: 36181 EAST LAKE ROAD, SUITE #145
City-St-Zip: PALM HARBOR, FL 346853142

Title: MGRM () Delete
Name: LEAL, PAUL
Address: 36181 EAST LAKE ROAD, SUITE #145
City-St-Zip: PALM HARBOR, FL 346853142

Title: MGRM () Delete
Name: DRISSI, DJALLOUL
Address: 36181 EAST LAKE ROAD, SUITE #145
City-St-Zip: PALM HARBOR, FL 346853142

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: PAUL LEAL

MGRM

04/25/2007

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