2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000022809

1. Entity Name BO-RED, L.L.C.



FILED Jan 28, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

NINE THIRD STREET NORTH, STE. 209 St. Petersburg, FL 33701 NINE THIRD STREET NORTH, STE. 209 St. Petersburg, Fl. 33701



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 22-3893598

Applied For Not Applicable

5. Certificate of Status Desired

X 55.

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOBELIS, ALGIROAS M 9-THIRD ST. NORTH, SUITE 209 SAINT PETERSBURG, FL 33701

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The above named entity submits this statement for the purpose of char the obligations of registered agent.	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE Registered Agent signature required when reinstating)	DATE
FILE NOW!! FFF IS \$138.75		

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOBELIS, ALGIRDAS M NINE THIRD STREET NORTH, STE. 209 ST. PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 eath; 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: WELLE / Y FOCE A VG 1985 M. FOLE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/23/08 727-822-5577