


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000026878

1. Entity Name
SMYRNA L.L.C.



Principal Place of Business 157 ST. CROIX AVENUE COCOA BEACH, FL 32931	Mailing Address 157 ST. CROIX AVENUE COCOA BEACH, FL 32931
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DO NOT WRITE IN THIS SPACE



02032007No Chg-LLC CR2E083 (11/05)

4. FEI Number 30-0192717	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LEADER, ROBERT J
 157 ST. CROIX AVENUE
 COCOA BEACH, FL 32931**

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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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2007**

U000000628061
 02/15/07-80086-011 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEADER, ROBERT J 157 ST. CROIX AVENUE COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AMGR LEADER, HENRY J 107 E MAIN ST GOUVERNEUR, NY 13642
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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 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: *Robert J. Leader* **Feb. 5, 2007** **321 784-4082**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #