


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 25, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # L03000048403  
 1. Entity Name  
 QUATTROCCHI REAL ESTATE, LLC



Principal Place of Business      Mailing Address  
 130 NORTH TROPICAL TRAIL      130 NORTH TROPICAL TRAIL  
 MERRITT ISLAND, FL 32953      MERRITT ISLAND, FL 32953

**DO NOT WRITE IN THIS SPACE**



01122007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 32-0099783	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  
 QUATTRUCCHI, DANIEL  
 130 NORTH TROPICAL TRAIL  
 MERRITT ISLAND, FL 32953

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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 file if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM QUATTROCCHI, DANIEL 130 NORTH TROPICAL TRAIL MERRITT ISLAND, FL 32953
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 01/29/07-80010-004 50.00

**DO NOT WRITE IN THIS SPACE**

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: *Daniel Quattrocchi*      1/22/07      321-452-8668  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #