


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000058959</b>	
1. Entity Name PALMER ISLAND LLC	

Principal Place of Business 4650 DONALD ROSS RD STE 116 PALM BEACH GARDEN, FL 33410	Mailing Address 4650 DONALD ROSS RD STE 116 PALM BEACH GARDEN, FL 33410
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**DO NOT WRITE IN THIS SPACE**



01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5020196	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

CHEUNG, SHUK HUN  
 4320 UNION SQUARE BLVD., #244  
 PALM BEACH GARDEN, FL 33410

**DO NOT WRITE IN THIS SPACE**

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)

**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 CHEUNG, SHUK HUN 4320 UNION SQUARE BLVD., #244 PALM BEACH GARDEN, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHEUNG, MAU CHUNG 4320 UNION SQUARE BLVD., #244 PALM BEACH GARDEN, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZHANG, SU MIN 4320 UNION SQUARE BLVD., #244 PALM BEACH GARDEN, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR QIU, JUN MING 4320 UNION SQUARE BLVD., #244 PALM BEACH GARDEN, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WONG, TAM SING 4320 UNION SQUARE BLVD., #244 PALM BEACH GARDEN, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TANG, WAN SANG 4176 INVERRARY DR. #305 LAUDERHILL, FL 33319

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U00000783261  
 01/16/08-80008-007 138.75

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: X [Signature] Date: 01/14/08 (201) 244-7859  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE