


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000073680		
1. Entity Name EMILIE INVESTMENT, LLC		
Principal Place of Business 1039 45TH AVENUE NORTH ST. PETERSBURG, FL 33703 US	Mailing Address 1039 45TH AVE SAINT PETERSBURG, FL 33703 US	



02132008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4303486	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

GREGORY, RONALI
721 FIRST AVENUE
ST. PETERSBURG, FL

*ENCLOSE A
CHECK FOR
\$138.75*

**DO NOT WRITE
IN THIS SPACE**

registered agent, or both, in the State of Florida. I am familiar with, and accept

8. The above named entity shall
the obligations of registered

SIGNATURE _____
Signature, typed or printed

required when reinstating)

DATE

**FILE NOW!!! FEE
After May 1, 2008 Fee**

*PAYABLE TO
"FLORIDA DEPT. OF
STATE"*

9. M
TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
YOUNGBLOOD,
1039 45TH AVEN
ST. PETERSBURG

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

000000841649
03/10/08-80018-022 138.75

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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: *Angela Youngblood* ANGELA YOUNGBLOOD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/21/08 727-647-4527