

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000058959

**FILED**  
**Apr 16, 2013**  
**Secretary of State**  
**CC9320735425**

**Entity Name:** PALMER ISLAND LLC

**Current Principal Place of Business:**

4650 DONALD ROSS RD STE 116  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

4650 DONALD ROSS RD STE 116  
PALM BEACH GARDENS, FL 33418

**FEI Number:** 20-5020196

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHEUNG, SHUK HUN  
4650 DONALD ROSS RD STE 116  
PALM BEACH GARDENS, FL 33418 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name CHEUNG, SHUK HUN  
Address 8415 W ALISTER BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title MGR  
Name CHEUNG, MAU CHUNG  
Address 8415 W ALISTER BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title MGR  
Name ZHANG, MIKE  
Address 252 TIMBERWALK TRAIL  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name WU, SHI ZHAN  
Address 134 SOUTH HAMPTON DRIVE  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name WONG, TAM SING  
Address 252 TIMBERWALK TRAIL  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name TANG, WAN SANG  
Address 252 TIMBERWALK TRAIL  
City-State-Zip: JUPITER FL 33458

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHUK HUN CHEUNG

**MGR**

**04/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date