

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000022707

**Entity Name:** SNP HOME IMPROVEMENTS CO. LLC**Current Principal Place of Business:**4265 LUAWANA DR  
SARASOTA, FL 34241**Current Mailing Address:**4265 LUAWANA DR  
SARASOTA, FL 34241 US**FEI Number:** 94-3471093**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PERETS, STANISLAV N  
4265 LUAWANA DR  
SARASOTA, FL 34241 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	MGRM	Title	COO
Name	PERETS, STANISLAV N	Name	PERETS, MARTIN N
Address	4265 LUAWANA DR	Address	2483 FRANTZ ST
City-State-Zip:	SARASOTA FL 34241	City-State-Zip:	NORTH PORT FL 34286
Title	DIRECTOR	Title	CFO
Name	PERETS, VADIM N	Name	PERETS, JOHN
Address	12137 DORADO DR	Address	2483 FRANTZ ST
City-State-Zip:	NORTH PORT FL 34287	City-State-Zip:	NORTH PORT FL 34286
Title	SECRETARY		
Name	SAVITSKIY, VIKTOR		
Address	1410 ALHAMBRA WAY S		
City-State-Zip:	ST. PETE FL 33705		

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STANISLAV PERETS

CEO

04/30/2014

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