20	007 LIMITED LIAI ANNUAL	BILITY COMPA REPORT	FILED Apr 30, 2007 08:00 A Secretary of State			
DOCUMENT # L0000000498 1. Entity Name SCHMIDT INTERNATIONAL, LLC					Secre	tary of State
Principal Place of Business Mailing Address 2226 SR 580 2226 SR 580 CLEARWATER, FL 33763 CLEARWATER, FL 33763		-			R MARKI CURI CARA ANA KAKI K	I dah dalah diari di diari .
C	O NOT WRITE	IN THIS SPA	CE	04102007 No Chg-LL 4. FEI Number	C CR2E08	
	6. Name and Address of Current R	anistered Agent		59-3620602 5. Certificate of Status D		Not Applicable 5.00 Additional e Required
300 SOUT SUITE 100	ES, J. GREGORY ESQ. H ORANGE AVENUE	ogistered Agent		DO NOT IN THIS	WRITE SPACE	
	named entity submits this statement for t lions of registered agent. Signature, typed or printed name of registered agent and		ed office or register		te of Florida. I am fan DATE	niliar with, and accept
	iling Fee is \$50.00 ue by May 1, 2007					
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER P SCHMIDT, ROBERT E JR 2226 SR 580 CLEARWATER, FL 33763	S/MANAGERS		n a ser a	۰ ۲	· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT	WRITE	, : · · ·
TITLE NAME Street address City-st-zip				IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U0000074325 15/07-80103	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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: 4/24/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Date Date Date						

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