2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

FILED
Jan 11, 2007 08:00 AM
Secretary of State

Daytime Phone #

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1. Entity Name	MENT # L000000029	968		Secr	retary of Sta
Principal Place	e of Business	Mailing Address			
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			No.	4. FEI Number 65-0994512	Not Applicable
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			The same of the sa	5. Certificate of Status Desired	Fee Required
	6. Name and Address of Current R	egistered Agent	Control of the Control		<u> </u>
	V. Hallip and Address of Cartesia	OBIOIOGO NEGOTA			· !
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	named entity submits this statement for ions of registered agent	the purpose of changing its regist	ered office or register	red agent, or both, in the State of Florida.	am tamiliar with, and accept
ine obligat	ions of registered grand	// 1 4		118	107
SIGNATURE_	MARKE			1 0	101
	Signature, typed or printed hame of registered agent ar	id interiopplicable (NOTE: Regist	ered Agent signature required	d when reinsta(ing) DA	E
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9.	Iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBER	IS/MANAGERS			
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9.	ue by May 1, 2007 MANAGING MEMBER	S/MANAGERS			· · · · · · · · · · · · · · · · · · ·
9. Trille	ue by May 1, 2007 MANAGING MEMBER MGRM	S/MANAGERS		Норосопол	
9. Trile NAME	MANAGING MEMBER MGRM UCCELLO, ANTONIO F III	S/MANAGERS		U00000582	692
9. Trile NAME STREET ADDRESS CITY-SY-ZIP	MANAGING MEMBER MGRM UCCELLO, ANTONIO F III 2100 19TH ST.	S/MANAGERS		U00000582 01/11/07-800	892 842-002 50.00
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGRM UCCELLO, ANTONIO F III 2100 19TH ST.	S/MANAGERS		U00000582 01/11/07-800	1692 142-002 50.00
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