2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000014639

1. Entity Name
SUN STATE INTERNATIONAL REAL ESTATE, LLC

Principal Place of Business	Mailing Address
6020 ADAMO DR TAMPA, FL 33619	6020 ADAMO DR TAMPA, FL 33619

DO NOT WRITE IN THIS SPACE

04262006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
59-3693112		Not Applicable
5. Certificate of Status Desired	☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HORTON, OSCAR J
6020 ADAMO DR
TAMPA, FL 33619

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	P
NAME	HORTON, OSCAR J
STREET ADDRESS	6020 ADAMO DR
CITY-ST-ZIP	TAMPA, FL 33619
TITLE	ST
NAME	HOCKEMEYER, KATHY J
STREET ADDRESS	6020 ADAMO DR
CITY-ST-ZIP	TAMPA, FL 33619
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Kesha Freeny*   4/24/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #