


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007 08:00 A
Secretary of State

DOCUMENT # L00000014639

1. Entity Name
SUN STATE INTERNATIONAL REAL ESTATE, LLC



Principal Place of Business 6020 ADAMO DR TAMPA, FL 33619	Mailing Address 6020 ADAMO DR TAMPA, FL 33619
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DO NOT WRITE IN THIS SPACE



04172007No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3693112	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**HORTON, OSCAR J
 6020 ADAMO DR
 TAMPA, FL 33619**

DO NOT WRITE IN THIS SPACE

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, 2007**

U000000728875
 05/08/07-80012-043 220.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HORTON, OSCAR J 6020 ADAMO DR TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOCKEMEYER, KATHY J 6020 ADAMO DR TAMPA, FL 33619
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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: *Barbara Crow* 4/17/07 813-621-1331

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