


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 08, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000003738
 1. Entity Name
 OZTEMEL INVESTMENTS, LLC



| | |
|---|---|
| Principal Place of Business 600 GRAPE TREE DRIVE, APT. 3AS KEY BISCAYNE, FL 33149 | Mailing Address 600 GRAPE TREE DRIVE, APT. 3AS KEY BISCAYNE, FL 33149 |
|---|---|



07172007 No Chg-LLC CR2E083 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 06-1608194 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent
 OZTEMEL, MARY
 600 GRAPE TREE DRIVE, APT. 3AS
 KEY BISCAYNE, FL 33149

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by September 14, 2007

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR OZTEMEL, MARY 600 GRAPE TREE DRIVE, APT. 3AS KEY BISCAYNE, FL 33149 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR OZTEMEL, GLENN 600 GRAPE TREE DRIVE, APT. 3AS KEY BISCAYNE, FL 33149 |
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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: Mary Oztemel 7/30/07
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #