2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000021836

1. Entity Name MIST INVESTMENTS, LLC



Principal Place of Business

46 N. WASHINGTON BLVD, 21A SARASOTA, FL 34236

Mailing Address

46 N. WASHINGTON BLVD, 21A SARASOTA, FL 34236

FILED Mar 02, 2007 08:00 AM Secretary of State



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02192007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 01-0707444 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DELPECH, MELINDA 46 N. WASHINGTON BLVD 21A SARASOTA, FL 34236

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3. 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 algorithms required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELPECH, MELINDA 46 N. WASHINGTON BLVD, 21A SARASOTA, FL 34237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SVIRSKY, MICHAEL 46 N. WASHINGTON BLVD, 21A SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SVIRSKY, STEVE 46 N. WASHINGTON BLVD, 21A SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS	

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11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. If 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: V

CITY-ST-ZIP

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

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Davtme Phone #