## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L02000003660** 

1. Entity Name S&I VENTURES, LLC

Principal Place of Business

1527 MISSOURI AVE. SOUTH CLEARWATER, FL 33756

Mailing Address

1527 MISSOURI AVE. SOUTH CLEARWATER, FL 33756 FILED Feb 25, 2008 08:00 AN Secretary of State



01222008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number	Applied For
	01-0597985	Not Applicabl
5.	Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VAZQUEZ, JUAN 1527 MISSOURI AVE. SOUTH CLEARWATER, FL 33756

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this</li></ol>	istatement 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 pignature required when reinstating)

DATE

## FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000839694 03/06/08-80018-019 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P VAZQUEZ, JUAN 1527 S. MISSOURI AVE CLEARWATER. FL 33756
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: S

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1/23/08

727 461. 3432

Daytime Phone #