

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000009821



1. Entity Name
SHIOI LIMITED COMPANY

Principal Place of Business
7452 UNIVERSAL BLVD
ORLANDO, FL 32819 US

Mailing Address
7629 BAY PORT ROAD
ORLANDO, FL 32819 US



01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
35-2167070

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHIOI, TAKASHI
7629 BAY PORT ROAD
ORLANDO, FL 32819

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

U00000616877
02/07/07-80049-001 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
SHIOI, TAKASHI
7629 BAY PORT ROAD
ORLANDO, FL 32819

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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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 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

2/27/07