2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000016004

1. Entity Name SONAR BONAR, LLC



FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

4711 LEILA AVENUE TAMPA, FL 33616 Mailing Address

4711 LEILA AVENUE TAMPA, FL 33616



DO NOT WRITE IN THIS SPACE

01222008 No Chg-LLC
4 FEI Number

CR2E083 (12/07)

4. FEI Number 13-4204720 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BONAR, GARY 4711 LEILA AVENUE TAMPA, FL 33616

DO NOT WRITE IN THIS SPACE

	,		
8. The above the obligat	e named entity submits this statement for the purpose of chan tions of registered agent.	ging its registered office or registered agent, or both, in t	he State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable,	thom and the second sec	
· ·	жумших, турео от ригиво пытье от герзяватей воет вли две и вройсвое.	(NOTE: Registered Agent signature required when reinstating)	DATE ,
File After May	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	BONAR, GARY		
STREET ADDRESS	4711 LEILA AVE		
CITY-ST-ZIP	TAMPA, FL 33616		U00000916958 13/08-80022-005 138.75
TITLE		U5/	13/08-80022-005 138.75
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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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

ED OR PRINTED JAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #