


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

| | |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # L02000020225 1. Entity Name FINIS INVESTMENTS, LLC |  |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

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|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Principal Place of Business 5435 SEA BISCUIT ROAD PALM BEACH GARDENS, FL 33418 | Mailing Address 5435 SEA BISCUIT ROAD PALM BEACH GARDENS, FL 33418 |
|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE



01172008No Chg-LLC

CR2E083 (12/07)

| | |
|-------------------------------------------------------------------------|--------------------------------------------------------|
| 4. FEI Number 57-1158070 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

**TERMOTTO, JOHN
5435 SEA BICUIT RD
PALM BEACH GARDENS, FL 33418**

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

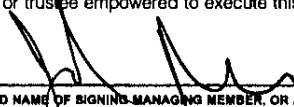
UG00000807655
02/07/08-80017-016 143.75

9. MANAGING MEMBERS/MANAGERS

| | |
|------------------------------------------------|-------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM TERMOTTO, JOHN 5435 SEA BISCUIT ROAD PALM BEACH GARDENS, FL 33418 |
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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 608, Florida Statutes.

SIGNATURE:  **1/29/08** **561-718-7522**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #