

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011346

FILED  
Feb 12, 2007  
Secretary of State

Entity Name: LABRIS INTERNATIONAL LLC

## Current Principal Place of Business:

4690 ST CROIX LANE  
428  
NAPLES, FL 34109

## New Principal Place of Business:

7580 MEADOW LAKES DRIVE  
3  
NAPLES, FL 34104

## Current Mailing Address:

4690 ST CROIX LANE  
428  
NAPLES, FL 34109

## New Mailing Address:

7580 MEADOW LAKES DRIVE  
3  
NAPLES, FL 34104

FEI Number: 32-0070073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZASINETS, RYHOR M  
4690 ST CROIX LANE  
428  
NAPLES, FL 34109 US

## Name and Address of New Registered Agent:

ANTSIPENKA, VIACHASLAU V  
7580 MEADOW LAKES DRIVE  
3  
NAPLES, FL 34104 US

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.

SIGNATURE: VIACHASLAU ANTSIPENKA

02/12/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR (X) Delete  
Name: REFES, JELENA  
Address: 1105 RESERVE COURT#304  
City-St-Zip: NAPLES, FL 34105 US

Title: MGR ( ) Delete  
Name: ZASINETS, RYHOR M  
Address: 4690 ST CROIX LANE  
City-St-Zip: 428, FL 34109 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: VIACHASLAU ANTSIPENKA

MGR

02/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date