


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

37. **FILED**
Apr 15, 2008 8:00 am
Secretary of State

03-20-2008 90178 005 ***138.75

DOCUMENT # L03000011411

1. Entity Name
PETRO-QUAD III, LLC



Principal Place of Business: **2356 W. HILLSBOROUGH AVE. TAMPA, FL 33603**

Mailing Address: **2356 W. HILLSBOROUGH AVE. TAMPA, FL 33603**

30003912



DO NOT WRITE IN THIS SPACE

03062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 56-2335644	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHWANKE, TIM
15312 CARROLLTON LANE
TAMPA, FL 33624

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's signature required when reissuing) DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CHARARA, RADWAN 4840 RIDGE MOORE BLVD PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CHARARA, HASSAN 4840 RIDGE MOORE BLVD PALM HARBOR, FL 34685
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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: *Hass Charara* **HASS CHARARA** 7.9.08 727 785-0044

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