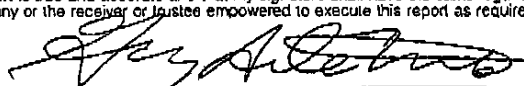


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000011968 1. Entity Name ALFASNU PROPERTY PROMOTIONS LLC		
Principal Place of Business 4500 140TH AVE. N. STE. 101 CLEARWATER, FL 33762 US	Mailing Address P.O. BOX 17581 CLEARWATER, FL 33762-0581 US	
DO NOT WRITE IN THIS SPACE		
4. FEI Number 65-1181017		Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent DEMATOS, GARY A 2236 GULF TO BAY BLVD 337 CLEARWATER, FL 33765		
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 re/instating) _____ DATE _____ Signature, typed or printed name of registered agent and file if applicable.		
Filing Fee is \$50.00 Due by September 14, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEMATOS, GARY A 2236 GULF TO BAY BLVD. 337 CLEARWATER, FL 33765	DO NOT WRITE IN THIS SPACE 
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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 or trustee empowered to execute this report as required by Chapter 606, Florida Statutes. SIGNATURE:  7-12-07 7276429065 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #		