2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000012513

PIRATES COVE OF TAMPA BAY, LLC



Principal Place of Business

2101 WEST PLATT: #200 -

TAMPA, FL 33606

403 N. HOWARD AVE

Mailing Address

403 2101 WEST PLATT, #200

TAMPA, FL 33606

60050008

FILED

May 09, 2007 8:00 am Secretary of State

05-09-2007 90026 043 ****50.00

04132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0059966

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, JOSEPH L ESQ. 2522 WEST KENNEDY BLVD. TAMPA, FL 33609

SIGNATURE:

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SIGNATURE	e. (NOTE: Registered Agent signature required when reinstating)	DATE
Filling Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGE	RS	
IIILE MGR. LUM, JOHN 403 N. Hos STREET ADDRESS CITY-ST-ZIP TAMPA, FL: 32606	ward Ave. 200	
THLE MGR NAME GULUZIAN, ARAM 403 N. H STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33606	OWArd Ave	
TITLE NAME STREET ADDRESS CITY S1-ZIP	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN	THIS SPACE
IIILE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplies with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is frue and accurage 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.		

NTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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