2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 31, 2007 8:00 am Secretary of State

ANNUAL KEPUKI				Se	Secretary of State			
DOCU	MENT # L03000016	100	·	01-31-2007 90086 022 ****50.00				
ROPARZ	HOLDINGS, LLC							
	e of Business	Mailing Address		·	?			
C/O RENEE F 210 DAVIDS		C/O RENEE P. BROWN P. O. BOX 383						
SHARON, GA 30664		SHARON, GA 30664		1 (\$20)\$() (rii aajse jirii aa jib ac iik a a	iyik Belok tigan Olinik Okkio li		
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01032007	01032007 Chg-LLC CR2E083 (12/06)			
City & State		City & State		4. FEI Numi		· ·	Applied For	
				65-11			Not Applica	
210 06 64 Country S A		Zíp	Country	5. Certificat	e of Status Desired	□ \$5.00 Fee Re	Additional quired	
	6. Name and Address of Current	Registered Agent		7. Name an	d Address of New I	Registered Agent		
BROWN	JACOB A ESQ.		Name					
	I LAURA STREET		Street Add	iress (P.O. Box Num	ber is Not Acceptabl	e)		
	VILLE, FL 32202							
	* \tag{*}		City			FL Zip	Code	
	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or re	egistered agent, or b	oth, in the State of Fl	orida. I am familiar	with, and acce	
,	ions or registered agent.							
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature	required when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2007					Make check payable to Florida Department of State			
9.	MANAGING MEMBE	RS/MANAGERS	10.		ADDITIONS	/CHANGES		
TITLE	MGRM	☐ Delete	TITLE	- -		☐ Cha	inge 🗌 Addit	
NAME STREET ADDRESS	BROWN, RENEE P MANAGER		NAME					
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NAME

STREET ADDRESS

CITY-ST-ZIP

A & Brown

NAME

STREET ADORESS

CITY-ST-ZIP

^{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.