


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 AM
Secretary of State

| | |
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| DOCUMENT # L03000016946 1. Entity Name OFFICE VENTURES L.L.C. |  |
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|---|---|
| Principal Place of Business 15875 BRITTEN LANE WELLINGTON, FL 33414 | Mailing Address 15875 BRITTEN LANE WELLINGTON, FL 33414 |
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02202008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 83-0358071 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent LLOYD GRANET, PA 2295 CORPROATE BLVD., STE. 235 BOCA RATON, FL 33431 |
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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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

U000000908122
05/06/08-80018-007 138.75

| 9. MANAGING MEMBERS/MANAGERS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SCHMIDT, FREDERICK J 8233-18 GATOR LANE WEST PALM BEACH, FL 33411 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P JAFTE, DENNIS J 15875 BRITTEN LANE WELLINGTON, FL 33414 |
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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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Signature