## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 30, 2008 08:00 AN Secretary of State

	_ ANNUAL KEPUKI			50, 2000 00.00
1. Entity Nam	MENT # L03000017151		S	ecretary of Sta
Principal Place of Business  418 SURREY DR  GULF BREEZE, FL 32561 US  Mailing Address  418 SURREY DR  GULF BREEZE, FL 32561 US  GULF BREEZE, FL 32561 US			 	1111 YAN 1811 HAL HAL AND NAKA 81 HA
г	OO NOT WRITE IN THIS SPA	CE	04242008 No Chg-LLC	CR2E083 (12/07)
L	O NOT WRITE IN THIS SPA	ICE	FEI Number     51-0843226     Certificate of Status Desired	Applied For Not Applicable  \$5.00 Additional Fee Required
	6. Name and Address of Current Registered Agent			r do maquilou
DELUCA, JANA R 418 SURREY DR GULF BREEZE, FL 32561			DO NOT WE	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			U00000 05/27/08-	936377 -80009-005 138.75
9.	MANAGING MEMBERS/MANAGERS P	$\mathbf{H}$		
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELUCA, JANA 418 SURREY DR GULF BREEZE, FL 32561	_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		]		
TITLE NAME STREE1 ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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.				

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: