


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000049736 1. Entity Name GEOGOUV, LLC	
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Principal Place of Business 400 NORTH RIVERSIDE DRIVE APT. 102 POMPANO BEACH, FL 33062	Mailing Address 400 NORTH RIVERSIDE DRIVE APT. 102 POMPANO BEACH, FL 33062
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01132007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GOUVEIA, GEORGE 400 NORTH RIVERSIDE DRIVE APT. 102 POMPANO BEACH, FL 33062
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**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 reappointing) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000598787.
01/24/07-80088-025 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOUVEIA, GEORGE 400 NORTH RIVERSIDE DRIVE, APT. 102 POMPANO BEACH, FL 33062
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IN THIS SPACE**

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.

GEORGE GOUVEIA, MGR

SIGNATURE: *George Gouveia mgr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/18/07 *954-782-8282*
Date Daytime Phone #

*Pa 1/18/07
CA# 550*