

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

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

**DOCUMENT # L03000050914**

1. Entity Name  
HUPER OPTIK FLORIDA, LLC



Principal Place of Business

5043 S TAMiami TRAIL  
SARASOTA, FL 34231

Mailing Address

6210 LOCKWOOD RIDGE ROAD, #201  
SARASOTA, FL 34243-2529



01042007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
43-2036384

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BURKE, M. TODD ESQ  
BURKE, BLUE & HUTCHISON, PA  
215 GRAND BLVD, STE 101  
DESTIN, FL 32550

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAM, LEVY A 6210 N LOCKWOOD RIDGE RD #201 SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DANA, LEVY G 6210 N LOCKWOOD RIDGE RD #201 SARASOTA, FL 34243
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U000000578409  
01/09/07-80029-001 50.00

**DO NOT WRITE  
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.

**SIGNATURE:** \_\_\_\_\_

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

Date

Daytime Phone #

1-4-07

941-351-0049