2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000003988

1. Entity Name SHEKINA GROUP LLC

Principal Place of Business

SARASOTA, FL 34243

7114 SOUTHGATE CT.

Mailing Address

7114 SOUTHGATE CT. SARASOTA, FL 34243 FILED Jan 08, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
92-0183216

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BASIST, STACEY 7114 SOUTHGATE CT. SARASOTA, FL 34243

NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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-SI-ZIP	MGRM BASIST, STACEY 7114 SOUTHGATE CT SARASOTA, FL 34243			
TITLE NAME STREFT ADDRESS CITY-ST-ZIP			U00000578769 01/09/07-80043-002 55.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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. 1 am familiar with, and accept

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 #