2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000008085

1. Entity Name

STEVE'S ROOF COATING, LLC



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2450 WEST 82ND STREET, UNIT 301 HIALEAH, FL 33016

2450 WEST 82ND STREET, UNIT 301 HIALEAH, FL 33016



04212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
59-2530387		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

MAYAN, JULIA A 1570 MADRUGA AVE., PENTHOUSE-3 CORAL GABLES, FL 33146

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	named entity submits this statement for the purpose of changions of registered agent.	ing its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE After Ma ₃	: NOW!!! FEE IS \$138.75 , 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHOKANIS, STEVE 2450 WEST 82ND STREET, UNIT 301 HIALEAH, FL 33016		U00000924681 05/19/08-80011-007 138.75		
TITLE NAME STREET ADDRESS CITY-ST-2IP	MGRM CHOKANIS, STEVE 2450 WEST 82ND STREET, UNIT 301 HIALEAH, FL 33016				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO I	NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 eath; 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 TYPES OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-22-08 305-556-5265

Daytime Pho