## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000012181**

Entity Name

ELITÉ VEIN CENTER OF DESTIN, LLC



FILED Mar 19, 2007 08:00 AM Secretary of State

Principal Place of Business

12671 EMERALD COAST PKWY

**STE 210** 

DESTIN, FL 32550

Mailing Address

12671 EMERALD COAST PKWY

STE 210

DESTIN, FL 32550



01112007 No Chg-LLC

CR2E083 (11/05)

B.15.07

4. FEI Number		Applied For
20-0734790		 Not Applicable
5. Certificate of Status Desired		O Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JIMENEZ, JAMES 8653 ROSEMONT DR PENSACOLA, FL 32514

the obligations of registered agent

## DO NOT WRITE IN THIS SPACE

SIGNATURE_	Signesure-expect or primes nemy of registeres spart and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
	ling Fee is \$50.00 ue by May 1, 2007		U00000671727 03/28/07-80040-024 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JIMENEZ, JAMES 8653 ROSEMONT DR PENSACOLA, FL 32514			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
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 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.				

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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