2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000014793

1. Entity Name

EXPÓREN PROPERTIES LLC



FILED Apr 16, 2008 08:00 Al Secretary of State

Principal Place of Business

3702 S. VIRGINIA STREET STE. G12-401

RENO, NV 89502

Mailing Address

3702 S. VIRGINIA STREET STE G12-401 RENO, NV 89502



01212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number -	Applied For
20-0774678	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

DO NOT WRITE IN THIS SPACE

URE: Reming Renald's Fleming
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, CHIAUTHORIZED REPRESENTATIVE

6. Name and Address of Current Registered Agent

PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303

the obligations of registered agent.

SIGNATURE_

DO NOT WRITE IN THIS SPACE

	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		U00000901234 04/29/08-80057-022 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FLEMING, RENALDO P.O. BOX 7277 PORT ST. LUCIE, FL 34985		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FLEMING, VALERIE P.O. BOX 7277 PORT ST. LUCIE, FL 34985		•
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
indicated	certify that the information supplied with this filing does not on this report is true and accurate and that my signature sl bility company or the receiver or trustee empowered to exe	hall have the same legal effect as it made under o	ath; that I am a managing member or manager of the

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