


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 A
Secretary of State

DOCUMENT # L04000023501 1. Entity Name PERLAS, LLC	
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Principal Place of Business 2312 TIMBERLINE DRIVE MELBOURNE, FL 32934	Mailing Address P.O. BOX 33611 INDIALANTIC, FL 32903-0611
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DO NOT WRITE IN THIS SPACE



02192007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 76-0755497	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent LARKIN, DAVID G 1900 S. HICKORY STREET, STE. A MELBOURNE, FL 32901

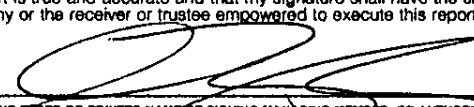
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZIZZO, ANTHONY 2312 TIMBERLINE DRIVE MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OGGLIARO, JOHN PO BOX 33611 INDIALANTIC, FL 32903
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000669037 03/27/07-80054-023 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
Date <u>3/15/07</u> Daytime Phone # <u>321-751-4201</u>