
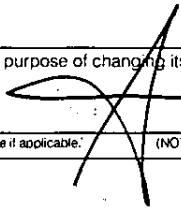
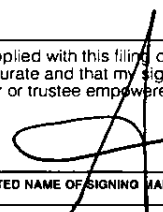


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90069 040 ***138.75

DOCUMENT # L04000030259					
1. Entity Name MID-CITY INVESTMENT GROUP, LLC					
Principal Place of Business 2253 CENTRAL AVE SAINT PETERSBURG, FL 33713			Mailing Address 2253 CENTRAL AVE SAINT PETERSBURG, FL 33713		
2. Principal Place of Business - No P.O. Box # 341 3rd Street S.		3. Mailing Address 341 3rd Street S.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State St. Petersburg, FL		City & State St. Petersburg, FL		4. FEI Number 20-1079463	
Zip 33701		Country U.S.A.		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent VILLARI, GIUSEPPE 2253 CENTRAL AVE SAINT PETERSBURG, FL 33713			7. Name and Address of New Registered Agent Name: Villari, Giuseppe Street Address (P.O. Box Number is Not Acceptable): 341 3rd Street S. City: St. Petersburg FL Zip Code: 33701		
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:  Giuseppe Villari 1/25/08 <small>Signature, typed or printed name of registered agent and title if applicable: (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE MGR NAME VILLARI, GIUSEPPE STREET ADDRESS 2253 CENTRAL AVE CITY - ST - ZIP SAINT PETERSBURG, FL 33713	<input type="checkbox"/> Delete		TITLE MGR NAME Villari, Giuseppe STREET ADDRESS 341 3rd Street S. CITY - ST - ZIP St. Petersburg, FL 33701	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE MGRM NAME HASELOFF, PETER STREET ADDRESS 2253 CENTRAL AVE CITY - ST - ZIP SAINT PETERSBURG, FL 33713	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE MGRM NAME DONALD, ALVAN STREET ADDRESS 2253 CENTRAL AVE CITY - ST - ZIP SAINT PETERSBURG, FL 33713	<input type="checkbox"/> Delete		TITLE MGRM NAME Donald, Alvan STREET ADDRESS 341 3rd Street S. CITY - ST - ZIP St. Petersburg, FL 33701	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE MGRM NAME VILLARI, MARCO STREET ADDRESS 2253 CENTRAL AVE CITY - ST - ZIP SAINT PETERSBURG, FL 33713	<input type="checkbox"/> Delete		TITLE MGRM NAME Villari, Marco STREET ADDRESS 341 3rd Street S. CITY - ST - ZIP St. Petersburg, FL 33701	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  Giuseppe Villari 1/25/08 727-822-0038 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					