

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90040 039 ****50.00

DOCUMENT # L04000034578

1. Entity Name
ENTERPRISE, LLC



Principal Place of Business
**18550 UNITED STATES HIGHWAY 441
SUITE A
MOUNT DORA, FL 32757 US**

Mailing Address
**PO BOX 297
TAVARES, FL 32778 US**

DO NOT WRITE IN THIS SPACE



03162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHANG, KHAI S
17820 SE 100TH AVENUE, SUITE 411
SUMMERFIELD, FL 34491**

SAME AS ABOVE

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
CHANG, KHAI S
18550 UNITED STATES HIGHWAY 441 SUITE A
MOUNT DORA, FL 32757**

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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: *Chang Khai Sheng*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/17/07

Date

Daytime Phone #