


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90142 001 ***138.75
 02-25-2008 90142 002 *****5.00

DOCUMENT # L04000037527
 1. Entity Name
 Z M PAINTING LLC



Principal Place of Business 4302 DREXEL AVE. ORLANDO, FL 32808	Mailing Address 4302 DREXEL AVE. ORLANDO, FL 32808
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DO NOT WRITE IN THIS SPACE



02112008No Chg-LLC CR2E083 (12/07)

4. FEI Number 57-1205899	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 MOHAMED, BIBI
 4302 DREXEL AVE.
 ORLANDO, FL 32808

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 renouncing) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MOHAMED, ZAMIN 4302 DREXEL AVE. ORLANDO, FL 32808
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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: Zamin Zamin 02 / 10 / 08 321 303 4733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #