2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000049964

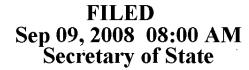
1. Entity Name

AMERI GROUP BUILDERS, LLC

Principal Place of Business

1938 BOBTAIL DR. MAITLAND, FL 32751 Mailing Address

1938 BOBTAIL DR. MAITLAND, FL 32127





07092008 No Chg-LLC

CR2E083 (12/07)

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

JONES, MATTHEW W 1938 BOBTAIL DR. MAITLAND, FL 32751

SIGNATURE:

SIGNATURE AND THE OR PRINT

DO NOT WRITE IN THIS SPACE

Date

Daytime Phone #

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: Report ered	Agent signature required when reinstating	DATE
FILE NOW!!! FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited Due by September 12, 2008 liability company did not receive the prior notice.					
9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JONES, MATTHEW W 1938 BOBTAIL DR. MAITLAND, FL 32751				
NAME STREET ADDRESS CITY-ST-ZIP				•	000000959354 09/09/08-80006-022 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- 11		DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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 accurred 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 furuses empowered to execute this report as required by Chapter 608. Florida Statutes.					

D NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE