2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000050454

Entity Name

PALIKA VENTURES, LLC.



FILED Apr 07, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

12226 GARDEN LAKE CIRCLE ODESSA, FL 33556

12226 GARDEN LAKE CIRCLE ODESSA, FL 33556



02292008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
43-2060540		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PLETCHER, JOHN J 12226 GARDEN LAKE CIRCLE ODESSA, FL 33556

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of chations of registered agent.	anging its registered office or registered agent, or both, in the St	ate of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE			
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	TOTE registred Agont Signature required threat remainings	DAIL			
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PLETCHER, JOHN J 12226 GARDEN LAKE CIRCLE ODESSA, FL 33556	04/1	U00000863784 04/17/08-80017-019 138.75			
THE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	IN THIS SPACE			
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

11. Thereby certify that the information supplied with this filling 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:

YPED OR PRINTED

EN NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATI

2/29/08

813293-6994

Daytime Phone I