

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000053325

1. Entity Name

SUPERIOR ONE THE HOME REPAIR SPECIALIST, LLC



Principal Place of Business

4664 JAVELINE STREET
MIDDLEBURG, FL 32068

Mailing Address

4664 JAVELINE STREET
MIDDLEBURG, FL 32068

DO NOT WRITE IN THIS SPACE



07312007No Chg-LLC

CR2E083 (11/05)

4. FEI Number
27-0139312

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

REPOVICH, FRANK J SR.
4664 JAVELINE STREET
MIDDLEBURG, FL 32068

**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 September 14, 2007**

700109526727
09/18/07--01005--019 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWNE REPOVICH, SR, FRANK J OWNER 4664 JAVELINE ST MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: _____

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

9-12-07 904-993-4828

Date

Daytime Phone #