

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 06, 2008 08:00 AM  
Secretary of State

DOCUMENT # L04000064139

1. Entity Name  
SAS TEXTILES, LLC.



Principal Place of Business

18557 SW 104 AVE  
MIAMI, FL 33157

Mailing Address

18557 SW 104 AVE  
MIAMI, FL 33157



01022008No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
20-1596735

Applied For  
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STARK, STEVE  
6753 SW 138 STREET  
MIAMI, FL FL

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	WINGATE, STEWART
STREET ADDRESS	18557 SW 104 AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	MGRM
NAME	STARK, STEVE
STREET ADDRESS	18557 SW 104 AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	MGRM
NAME	STARK, ALAN
STREET ADDRESS	18557 SW 104 AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000817858  
02/15/08-80011-015 138.75

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: *Stewart Wingate* Stewart Wingate Sec/Treas.

2/1/2008

803 222 4901

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

Date

Daytime Phone #