

FILED  
Apr 17, 2008 8:00 am  
Secretary of State

01-17-2008 90054 022 \*\*\*138.75

2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        |                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| DOCUMENT # L04000079214                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                        |         |
| 1. Entity Name<br>NIKKI A. URI, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                        |                                                                                          |
| Principal Place of Business<br>10331 REGENT CIRCLE<br>NAPLES, FL 34109 US                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                        | Mailing Address<br>10331 REGENT CIRCLE<br>NAPLES, FL 34109 US                            |
| DO NOT WRITE IN THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                        |                                                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | 01102008 No Chg-LLC CR2E083 (12/07)                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | 4. FEI Number<br>02-0734035                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | Applied For<br>No Applicable                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required |
| 6. Name and Address of Current Registered Agent<br>URI, NIKKI A<br>10331 REGENT CIRCLE<br>NAPLES, FL 34109                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                        | DO NOT WRITE<br>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: <u>Nikki A. Uri</u><br><small>Signature, which is printed name of registered agent and also is applicable. (NOTE: Registered Agent signature required when corresponding.) DATE</small>                                                                                                                                                                                                                                                                                                       |                                                                                        |                                                                                          |
| FILE NOW! FEE IS \$138.75<br>After May 1, 2008 Fee will be \$538.75                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                        |                                                                                          |
| 9. MANAGING MEMBERS/MANAGERS                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                        |                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MGRM<br>URI, NIKKI A<br>10331 REGENT CIRCLE<br>NAPLES, FL 34109<br><u>Nikki A. Uri</u> | DO NOT WRITE<br>IN THIS SPACE                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                        |                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                        |                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                        |                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                        |                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>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 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 enclose this report as required by Chapter 608, Florida Statutes. |                                                                                        |                                                                                          |
| SIGNATURE: <u>Nikki A. Uri</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                        | 4/15/08                                                                                  |