


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90192 001 ***150.00

DOCUMENT # L04000084042	
1. Entity Name VERO 3000, LLC	

Principal Place of Business 3540 FOREST HILL BLVD. SUITE 203 WEST PALM BEACH, FL 33406	Mailing Address 3540 FOREST HILL BLVD. SUITE 203 WEST PALM BEACH, FL 33406
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30003470



2. Principal Place of Business - No P.O. Box # 2655 North Ocean Dr Suite, Apt. #, etc. 310	3. Mailing Address 2655 North Ocean Dr Suite, Apt. #, etc. 310
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03242007 Chg-LLC CR2E083 (12/06)

City & State Singer Island FL Zip 33404 Country US	City & State Singer Island FL Zip 33404 Country US
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4. FEI Number 20-3410937	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent ARMOUR, ALAN I II 1645 PALM BEACH LAKES BLVD. SUITE 1200 WEST PALM BEACH, FL 33401	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HEATON, GEORGE W 2655 NORTH OCEAN BOULEVARD SUITE 310 SINGER ISLAND, FL 33404 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: George Heaton George W Heaton 3/24/07 561/8335500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #