


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000006767	
1. Entity Name SANDIA RENTAL LLC	

Principal Place of Business 1005 AXLEWOOD CIRCLE BRANDON, FL 33511	Mailing Address P.O. BOX 320641 TAMPA, FL 33679
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DO NOT WRITE IN THIS SPACE



02242007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2255284	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

ALAI, ALI
 1005 AXLEWOOD CIRCLE
 BRANDON, FL, FL 33511

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALAI, ALI P.O. BOX 320641 TAMPA, FL 33679
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TADAYON, PARVEYEN M P.O. BOX 320641 TAMPA, FL 33679
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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: *Ali Alai* Date: 02/28/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #