2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT #1.0500000262



FILED Apr 10, 2006 8:00 am Secretary of State

1. Entity Name SEMARA VENTURES, LLC							04-10-2006 90035 027 ****50.00					
Principal Place of Business 555 5TH AVE. NE #443 ST. PETERSBURG, FL 33701			Mailing Address 555 5TH AVE. NE #443 ST. PETERSBURG, FL 33701									
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				0106200	06	Chg-LLC	CR2E	083 (11/05)		
City & State			City & State				4. FEI Nu		37010		_ 	oplied For ot Applicable
Zip	Zip Country		Zip Coun		ry				Status Desired		\$5.00 Add Fee Require	
	Registered Agent				7. Name	and A	ddress of New	Registered	Agent			
SMITH, JAMES N			Name Street Add			latrage (D	ss (P.O. Box Number is Not Acceptable)					
555 5TH A		443 FL 33701	Street Addre			roress (r	O. BOX NO	IIIIDEI	IS NOT ACCEPTED			
					City					FL	Zip Cod	e
		ty submits this statement for stered agent.	the purpose of changing its	registere	d office or r	registere	ed agent, o	r both,	in the State of F	orida. I am	familiar with,	and accept
SIGNATURE _	Signature, typed	d or printed name of registered agent a	nd title if applicable. (NOTE	E: Registered	I Agent signature	re required t	when reinstating	3)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006												
Fi Oc	ling Fee ue by Ma	is \$50.00 y 1, 2006									payable to nent of State	B
FI De	ling Fee ue by Ma	is \$50.00 y 1, 2006 MANAGING MEMBER	RS/MANAGERS	10.						a Departn	nent of State	9
Dı	ling Fee ue by Ma	y 1, 2006	RS/MANAGERS	10. TITLE		MG R			ADDITIONS	a Departn	nent of State	Addition
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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 tames