2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Feb 08, 2007 08:00 AM Secretary of State

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1. Entity Name

VENEREO INVESTMENTS GROUP, LLC



Principal Place of Business 7485 WEST 2ND COURT HIALEAH, FL 33014 Mailing Address 7485 WEST 2ND COURT HIALEAH, FL 33014



02052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0533926

Applied For Not Applicable

5. Certificate of Status Desired

\$5.

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VENEREO, DAISY 7485 W 2ND CRT HIALEAH, FL 33014			DO NOT WRITE IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the purpose of changings of registered agent.	ging its registered off	ce ör registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
JIGIVATORE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent	signature required When reinstalling)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2007	· · · · · · · · · · · · · · · · · · ·			
9.	MANAGING MEMBERS/MANAGERS		··! -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SYMBIOS, INC. 450 LAS OLAS BOULEVARD, STE 1100 FORT LAUDERDALE, FL 33301				
INLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VENEREO, DANIEL 17641 NW 88TH AVE HIALEAH, FL 33018			1100000628589 02/16/07-80023-008 55.00	
Title Name Street address City-St-Zip			DO	NOT WRITE	
NILE NAME STREET ADDRESS CITY-ST-ZIP			IN.	THIS SPACE	
TITLE NAME STHEET ADDRESS CITY-ST-ZIP					
NAME SIREET ADDRESS CITY-ST-ZIP		-			
11. I hereby	certify that the information supplied with this filing does not q	uality for the exempt	ons contained in Chapter 11	9, Florida Statutes. I further certify that the information	

11. I hereby certify that the information supplied with this filling 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:		

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

Daytime Priorie #

Date