2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 10, 2007 8:00 am Secretary of State

DOCUMENT # L05000024072 1. Entity Name SEPCO INVESTMENTS ONE LLC					04-10-2007 9008	3 013 ****5	0.00	
Principal Place of Business 609 SEA GULL EDGEWATER, FL 32141		Mailing Address 609 SEA GULL EDGEWATER, FL 32141						
2. Principal Place of Business - No P.O. Box # 1007 EGRET COURT Suite, Apt. #, etc.		3. Mailing Address 1007 EGRET COURT Suite, Apt. #, etc.		03052007	03052007 Chg-LLC CR2E083 (12/06)			
City & State Edgewater FL		City & State Edgewater Flu Zip Country		4. FEI Numb 20-479		Not	plied For t Applicable	
32141	Country USA 6. Name and Address of Current R	32141	USA_		e of Status Desired d Address of New Registere	\$5.00 Addi Fee Required ed Agent		
KHAN, NAJEEB 609 SEA GULL EDGEWATER, FL 32141			Name Street Address (P.O. Box Number is Not Acceptable) 1000 EGRET COURT City Edgewater FL Zip Code 32141					
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 Signature, typed or printed marine of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE								
Filing Fee is \$50.00 Due by May 1, 2007			inglisia ao mga mga mara-a	adhion at all the second	1	k payable to rtment of State		
9.	MANAGING MEMBER	IS/MANAGERS	10.		ADDITIONS/CHANG	GES		
NAME I STREET ADDRESS (MGRM KHAN, NAJEEB 609 SEA GULL EDGEWATER, FL 32141	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	∞7 E6R	RET COURT	★ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Đelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ 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: NATERIA WATERIA WAT								