	2008 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED Apr 11, 2008 8:00 am Secretary of State		
421 WINE ST KSSIMMEE, FL 34741       421 WINE ST KSSIMMEE, FL 34741       421 WINE ST KSSIMMEE, FL 34741         DO NOT WRITE IN THIS SPACE       Mediation of the second state of th	1. Entity Nam	9			04-11-2008 90177 017 ***138.75		
DO NOT WRITE IN THIS SPACE       ORZE080 (207)         Image: Second and Address of Current Registered Agent       Image: Second address of Current Registered Agent         MELIA, AMANDA 1791 GATEWAY LANE KISSIMMEE, FL 34746       DO NOT WRITE IN THIS SPACE         Melia address of Current Registered Agent       DO NOT WRITE IN THIS SPACE         Melia address of Current Registered Agent       DO NOT WRITE IN THIS SPACE         Melia address of Current Registered Agent       DO NOT WRITE IN THIS SPACE         Melia address of address of Current Registered Agent       DO NOT WRITE IN THIS SPACE         Melia address of address of address of address of the purpose of the address of add	421 W VINE ST 421 W VINE ST						
MEJIA, AMANDA 1791 GATEWAY LANE KISSIMMEE, FL 34746  DO NOT WRITE IN THIS SPACE  I. The above named entity submits this assessed for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.  SIGNATURE					04062008 No Chg-LLC         CR2E083 (12/07)           4. FEI Number         Applied For           20-2475493         Not Applicable           5. Certificate of Status Desired         \$5.00 Additional		
the obligations of registered agent. SIGNATURE Server, speed or armsdrame of agenteed speet and the flagskatch (HOTE: Hegebred Agent Hystar's regard when instrating) DATE  FILE NOWIN: FEE 163 \$139,75 After May 1, 2008 Fee will be \$539,75     MORM ALAMINO, CHRISTINA SIRTER JORESS IT720 BIG OAK LANE CHT-ST-2P  TILE NAME SIRTER JORESS IT73 ST-2P  TILE NA	MEJIA, AMANDA 1791 GATEWAY LANE				· · · · ·		
After May 1, 2008 Fee will be \$538.75           9.         MANAGING MEMBERS/MANAGERS           ITTLE         MGRM           Nowe         ALAMINO, CHRISTINA           STRET ADDRESS         1720 BIG OAK LANE           CITY-SI-2P         KISSIMMEE, FL 34746           ITTLE         MGRM           NME         SIRET ADDRESS           CITY-SI-2P         DO NOT WRITE           ITTLE         NME           NME         SIRET ADDRESS           CITY-SI-2P         DO NOT WRITE           ITTLE         NME           SIRET ADDRESS         DO NOT WRITE           ITTLE         NME           SIRET ADDRESS         ITTLE           ITTLE         ITTLE           NAME         SIRET ADDRESS           ITTLE ADDRESS         ITTLE           I	the obligations of registered agent.						
ITTLE       MGRM         NWE       ALAMINO, CHRISTINA         SIPEETADDESS       1720 BIG OK LANE         ITTLE       KISSIMMEE, FL 34746         ITTLE       KISSIMMEE, FL 34746         ITTLE       MME         SIPEETADDESS       GITY-ST-2P         ITTLE       MME         SIPETADDESS	After May 1, 2008 Fee will be \$538.75						
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NWE         STREET ADDRESS         CITY-S1-2P         ITTLE         NWME         STREET ADDRESS         CITY-S1-2P         ITTLE         NWME         STREET ADDRESS         CITY-S1-2P         ITTLE         NUME         STREET ADDRESS         CITY-S1-2P         ITTLE         NUME         STREET ADDRESS         CITY-S1-2P <t< td=""><td>NAME Street Address City-St-Zip</td><td></td><td></td><td></td><td>Ŷ</td></t<>	NAME Street Address City-St-Zip				Ŷ		
With:       STREET ADDRESS         CITY-S1-2P       ITRE         NAME       STREET ADDRESS         CITY-S1-2P       ITRE         NAME       STREET ADDRESS         CITY-S1-2P       ITRE         TITLE       NAME         STREET ADDRESS       CITY-S1-2P         TITLE       NAME         STREET ADDRESS       CITY-S1-2P         11. 1 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 tree 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.         Value       Turbus A Manuture       Out OX ON	NAME Street address City-St-Zip						
NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         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 trge and accurate and that my signature shall have the same legal effect as if made under outh; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	NAME Street adoress				IN THIS SPACE		
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SIGNATURE: ALC VIEW A. JULIA C. HIAHINO. 04-07-08 407.5/8.6099							