2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000032042

1. Entity Name
CIMINILLO RESEARCH, LLC

Principal Place of Business	Mailing Address
1565 SIR HENRY'S TRAIL LAKELAND, FL 33809	1565 SIR HENRY'S TRAIL LAKELAND, FL 33809

DO NOT WRITE IN THIS SPACE

01102007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
30-0311301		Not Applicable
5. Certificate of Status Desired	☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RAMOS, DAVID R
4215 OLD ROAD 37
LAKELAND, FL 33813

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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 _____

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

Filing Fee is $50.00
Due by May 1, 2007

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CIMINILLO, JOSEPH V
STREET ADDRESS	1565 SIR HENRY'S TRAIL
CITY-ST-ZIP	LAKELAND, FL 33809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/20/07-80160-009 50.00

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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: ⟨ 4/8/07 ⟨ 863-815-0534
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #