


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90365 050 ***150.00

DOCUMENT # L05000036099 1. Entity Name FAIR OAKS ENTERPRISES, LLC	
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Principal Place of Business 1502 SOUTH MACDILL AVE. TAMPA, FL 33629	Mailing Address 1502 SOUTH MACDILL AVE. TAMPA, FL 33629
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DO NOT WRITE IN THIS SPACE



04032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-5048120	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent DIAZ, JOSEPH L ESQ. 2522 WEST KENNEDY BLVD. TAMPA, FL 33609
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**DO NOT WRITE
IN THIS SPACE**

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 NAME STREET ADDRESS CITY - ST - ZIP	MGR BAKER, TIM 3320 CARRINGTON ST TAMPA, FL 33611
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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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE
Date Daytime Phone #