

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000038035

1. Entity Name
REMEL INVESTMENTS, LLC



Principal Place of Business
**1915 S.W. 10 STREET
BOCA RATON, FL 33486-5207**

Mailing Address
**PO BOX 272626
BOCA RATON, FL 33427-2626 US**

DO NOT WRITE IN THIS SPACE



03252008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-3883188

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HIDALGO, EILLEN
1915 SW 10 STREET
BOCA RATON, FL 33486-5207**

**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 _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U000000881194
04/15/08-20091-013 128.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIR
HIDALGO, EILLEN
PO BOX 272626
BOCA RATON, FL 334272626**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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

4-1-08 561-393-6872

Date

Daytime Phone #