

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039011

**FILED**  
**Feb 05, 2008**  
**Secretary of State**

**Entity Name:** NITA ENTERPRISES, LLC

**Current Principal Place of Business:**

% NICOLAE NITA  
133 STANHOPE CIRCLE  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

% NICOLAE NITA  
133 STANHOPE CIRCLE  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 59-3821708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CURTIS CASSNER REGISTERED AGENT, LLC  
2664 AIRPORT ROAD SOUTH  
NAPLES, FL 34112 US

**Name and Address of New Registered Agent:**

CURTIS CASSNER REGISTERED AGENT, LLC  
4085 TAMiami TRAIL NORTH  
SUITE B 102  
NAPLES, FL 34103 US

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.

SIGNATURE:

02/05/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NITA, NICOLAE  
Address: 1796-A BALD EAGLE DRIVE  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: NICOLAE NITA

MGRM

02/05/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date