

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

04-23-2008 90119 016 ***138.50
 L.L.C. L05000042018
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY 15 PM 2:59

60026985



03052008No Chg-LLC CR2E083 (12/07)

DOCUMENT # L05000042018
 1. Entity Name
 J & S HARMER INTERNATIONAL, LLC



Principal Place of Business Mailing Address
 249 W. COCOA BEACH CAUSEWAY 249 W. COCOA BEACH CAUSEWAY
 COCOA BEACH, FL 32931 10 COCOA BEACH, FL 32931 10

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3635665	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
 HARMER, STEVEN
 249 W. COCOA BEACH CAUSEWAY
 COCOA BEACH, FL 32931

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARMER, JANE 155 BULVERHYTHE ROAD ST LEONARDS-ON-SEA, E SUSSEX, UK TN38 8AF
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARMER, STEVEN 155 BULVERHYTHE ROAD ST LEONARDS-ON-SEA, E SUSSEX, UK TN38 8AF
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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: J. Harmer JANE HARMER 4-9-08 321 799 9190
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #