

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 28, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000079077

1. Entity Name
PARADISE BOAT RENTALS LLC



Principal Place of Business
**5950 PENINSULAR AVE
KEY WEST, FL 33040**

Mailing Address
**5950 PENINSULAR AVE
KEY WEST, FL 33040**



08202007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3303274

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

8. Name and Address of Current Registered Agent

**RAMIREZ, CAMILO
5950 PENINSULAR AVE
KEY WEST, FL 33040**

**DO NOT WRITE
IN THIS SPACE**

9. 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 renewing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RAMIREZ, CAMILO
5950 PENINSULAR AVE
KEY WEST, FL 33040**

TITLE
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CITY-ST-ZIP

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08/28/07-80001-025 50.00

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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 606, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE **Camilo Ramirez**
Date **August 20, 2007** Daytime Phone # **(305) 293-0110**