2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 27, 2007 08:00 AM Secretary of State

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1. Entity Name LAKESIDE STATION, LLC



Principal Place of Business

Mailing Address

3658 ERINDALE DR VALRICO, FL 33594 3658 ERINDALE DR Valrico, Fl 33594



DO NOT WRITE IN THIS SPACE

01052007 No Chg-LLC

CR2E083 (11/05)

813-661-8419

4. FEI Number
20-3455360

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regurred

6. Name and Address of Current Registered Agent

HASBINI, ALI 3658 ERINDALE SR VALRICO, FL 33594

SIGNATURE:

SIGNATURE AND TYPE

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		
F	iling Fee is \$50.00 ue by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HASBINI, ALI 3658 ERINDALE DR VALRICO, FL 33594		000000650416 03/08/07-80012-022 50.00		
TITLE NAME STREET ADDRESS CITY-SI-ZIP			03/08/07-80012-922 50.00		
NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE		
TITLE : NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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 excurate 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 trie received or trigging among the impowered to execute this report as required by Chapter 608, Florida Statutes.					

ALL HASBINI

G MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE