

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 09, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000091336**

1. Entity Name  
**MAJOR INVESTMENTS, L.L.C.**



Principal Place of Business  
**10185 AVENIDA DEL RIO  
DELRAY BEACH, FL 33446**

Mailing Address  
**10185 AVENIDA DEL RIO  
DELRAY BEACH, FL 33446**



04012008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-4385662</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
<b>\$5.00 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**MACLAREN, LINDA O  
798 SO. FEDERAL HIGHWAY, SUITE 100  
BOCA RATON, FL 33432**

**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**

1100000888888  
04/22/08-80022-020 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>NGRM KAMINSKI, CHARLES S 10185 AVENIDA DEL RIO DELRAY BEACH, FL 33446</b>
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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 \_\_\_\_\_

*Charles S. Kaminski* 1 Apr 08

CK# 1155