

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000094272

Entity Name: LI INVESTMENTS LLC

FILED  
May 22, 2008  
Secretary of State

**Current Principal Place of Business:**

1517 BRILLIANT CUT WAY  
VALRICO, FL 33594 US

**New Principal Place of Business:**

**Current Mailing Address:**

1517 BRILLIANT CUT WAY  
VALRICO, FL 33594 US

**New Mailing Address:**

FEI Number: 20-3553937      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LI INVESTMENT  
1517 BRILLIANT CUT WAY  
VALRICO, FL 33594 US

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

LI, SHENGMEI  
1517 BRILLIANT CUT WAY  
VALRICO, FL 33594 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: SHENGMEI LI

05/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LI, SHENGMEI  
Address: 1517 BRILLIANT CUT WAY  
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM ( ) Delete  
Name: HU, CAIQIN  
Address: 1517 BRILLIANT CUT WAY  
City-St-Zip: VALRICO, FL 33594 US

**ADDITIONS/CHANGES:**

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

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: SHENGMEI LI

MGRM

05/22/2008

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