2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 03, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000106260

1. Entity Name
RIDANIS, LLC

Principal Place of Business	Mailing Address
11276 PINES BLVD., BAY 304 PEMBROKE PINES, FL 33026	11276 PINES BLVD., BAY 304 PEMBROKE PINES, FL 33026

DO NOT WRITE IN THIS SPACE

07262007No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-3717127
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GUZMAN, RITA
11276 PINES BLVD., BAY 304
PEMBROKE PINES, FL 33026

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 14, 2007

000001771381
08/03/07-80004-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GUZMAN, RITA
STREET ADDRESS	11276 PINES BLVD., BAY 304
CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE	MGR
NAME	PEREZ, LEDA
STREET ADDRESS	11276 PINES BLVD., BAY 304
CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE	MGR
NAME	HERRERA, CECILIO
STREET ADDRESS	11276 PINES BLVD., BAY 304
CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: X _____ 7/31/07 9549500227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #