


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000113189 1. Entity Name POSEIDON ENTERPRISES, LLC.	
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Principal Place of Business 2110 DREW ST CLEARWATER, FL 33765	Mailing Address 2110 DREW ST CLEARWATER, FL 33765
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01142007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3843284	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MAKRIS, JIMMY 2110 DREW ST CLEARWATER, FL 33765
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**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

**Filing Fee Is \$50.00
Due by May 1, 2007**


9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAKRIS, JIMMY 2110 DREW ST CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAKRIS, COSTAS 2110 DREW STREET CLEARWATER, FL 33765
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04/06/07-80019-020 50.00

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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



**JIMMY MAKRIS
MANAGING MEMBER**

Date

Daytime Phone #