


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90017 021 ***138.75

DOCUMENT # L06000021166 1. Entity Name N.A.S. INVESTMENTS, LLC																																															
Principal Place of Business 14941 SW 238 STREET HOMESTEAD, FL 33032			Mailing Address 14941 SW 238 STREET HOMESTEAD, FL 33032																																												
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																												
City & State Zip Country			City & State Zip Country																																												
4. FEI Number 20-8925884			Applied For <input type="checkbox"/> Not Applicable																																												
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required																																												
6. Name and Address of Current Registered Agent SANCHEZ, SHANIE 14941 SW 238 STREET HOMESTEAD, FL 33032				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																											
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																															
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> <tr> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 55%;"> MGRM SANCHEZ, SHANIE 14941 SW 238 STREET HOMESTEAD, FL 33032 </td> <td style="width: 10%; text-align: right;">Delete <input type="checkbox"/></td> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 55%;"> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="width: 10%; text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Delete <input type="checkbox"/></td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Delete <input type="checkbox"/></td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Delete <input type="checkbox"/></td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Delete <input type="checkbox"/></td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Delete <input type="checkbox"/></td> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td> <div style="border: 1px solid black; height: 40px;"></div> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANCHEZ, SHANIE 14941 SW 238 STREET HOMESTEAD, FL 33032	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; height: 40px;"></div>	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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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: <u>Shanie Sanchez</u> Shanie Sanchez 4-2008 786-488-9639 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																																															

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