2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000029650

1. Entity Name
HEAVEN KNOWS INVESTMENTS, A FLORIDA LIMITED
LIABILITY COMPANY

Principal Place of Business	Mailing Address
101 SE 6TH AVENUE, SUITE A	101 SE 6TH AVENUE, SUITE A
DELRAY BEACH, FL 33483	DELRAY BEACH, FL 33483

DO NOT WRITE IN THIS SPACE

01292008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-4606336	Not Applicable

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

6. Name and Address of Current Registered Agent

JOHN ROSS ADAMS, ESQ.
101 SE 6TH AVENUE, SUITE A
DELRAY BEACH, FL 33483

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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_____

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

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PIGNATO, JAMES V
STREET ADDRESS	101 SE 6H AVE STE A
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	MGRM
NAME	UNDERWOOD, MARY A
STREET ADDRESS	101 SE 6TH AVE STE
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	MGRM
NAME	PIGNATO, J. THOMAS
STREET ADDRESS	7546 DEER PATH LANE
CITY-ST-ZIP	LAND O' LAKES, FL 34637
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000821521
02/19/08-80028-002 138.75

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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: _____   2/6/08   813 7486614

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #