04/30/2008 01:59 4079573661 NARDOOSEE G

4/24/2008 2:24 PM FROM: Florida Agency, CPA FAX: 407-957-356

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Jun 04, 2008 8:00 am
Secretary of State
06-04-2008 90256 023 ***143.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000031905

1. Entity Name
FMS, LLC

Principal Place of Business	Mailing Address
1416 FIRST STREET, N.E WINTER HAVEN, FL 33881	1416 FIRST STREET, N.E. WINTER HAVEN, FL 33881

50006828

04242025 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4579806

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MADANI, IQBAL
1416 FIRST STREET, N.E.
WINTER HAVEN, FL 33881

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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 of new registered agent, if changing DATE

FILE NOW!! FEE IS $138.75
After May 1, 2008 Fee will be $638.75

9. MANAGING MEMBERS OR MANAGER

TITLE	MGRM
NAME	MADANI, IQBAL
STREET ADDRESS	1416 FIRST STREET, N.E
CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 605, Florida Statutes.

SIGNATURE: _____ 04 29 08

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