

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # L06000036408**

1. Entity Name  
F. MIRALDI INVESTMENTS, LLC



**FILED**  
**Aug 06, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business  
3131 W. GULF DRIVE  
UNIT 303  
SANIBEL, FL 33957

Mailing Address  
3131 W. GULF DRIVE  
UNIT 303  
SANIBEL, FL 33957



07282008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-4676045

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MIRALDI, FLORO  
3131 W. GULF DRIVE  
UNIT 303  
SANIBEL, FL 33957

**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

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
MIRALDI, FLORO  
3131 W. GULF DRIVE  
SANIBEL, FL 33957

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
MIRALDI, NANCY A  
3131 W. GULF DRIVE  
SANIBEL, FL 33957

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

U00000957223  
08/06/08-80004-020 143.75

**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 608, Florida Statutes.

**SIGNATURE:**

*Floro Miraldi* FLORO MIRALDI

7/29/08

216-932-0835

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #