

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2007 8:00 am
Secretary of State

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05-02-2007 90363 001 ****50.00
05-02-2007 90363 002 *****5.00

DOCUMENT # L06000039983					
1. Entity Name SG SPRINGHILL INVESTMENTS, LLC					
Principal Place of Business 18430 KUKA LANE SPRING HILL, FL 34610			Mailing Address 18430 KUKA LANE SPRING HILL, FL 34610		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address 13250 N 56 ST. 102		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State TAMPA FL			City & State TAMPA FL		
Zip 33617	Country U.S.	Zip 33617	Country U.S.	4. FEI Number 04162007 Chg-LLC CR2E083 (12/06)	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required				Applied For ☒ Not Applicable	
6. Name and Address of Current Registered Agent GHARSALLI, SALEM 18430 KUKA LANE SPRING HILL, FL 34610			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			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 _____ 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		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GHARSALLI, SALEM 18430 KUKA LANE SPRING HILL, FL 34610 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SALEM, MOHAMAD 13250 N 56 ST SUITE 102 TAMPA, FL 33617 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GHARSALLI, PAMELA M 18430 KUKA LANE SPRING HILL, FL 34610 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOHAMAD AXEL 5963 PATRICKA PL SPRING HILL, FL 34607 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SALEM, MOHAMED S 18430 KUKA LANE SPRING HILL, FL 34610 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AHMAD KSAIBAI P.O. Box 48 BRANIDON, FL 33509 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOHAMAD HIBA 14540 CORTEZ BLVD SUITE 115 BROOKSVILLE, FL 34613 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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>SALEM MOHAMAD</u> PROJECT MGR 4/29/07 (813) 984-0759 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					