

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000062635 1. Entity Name PALMETTO LIFT TRUCK LLC		
Principal Place of Business 7399 N.W. 74TH STREET MEDLEY, FL 33166 US	Mailing Address 7399 N.W. 74TH STREET MEDLEY, FL 33166 US	



02222008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5088349

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROZENCWAIG, NADEL & FERRERO-CARR, LLP
301 W. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009**

**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

U FI

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U00000870695
04/09/08-80031-008 150.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SUAREZ, FERNANDO
STREET ADDRESS	7399 N.W. 74TH STREET
CITY-ST-ZIP	MEDLEY, FL 33166
TITLE	MGR
NAME	SUAREZ, MAIDA
STREET ADDRESS	7399 N.W. 74TH STREET
CITY-ST-ZIP	MEDLEY, FL 33166
TITLE	MGR
NAME	SUAREZ, LAZARO
STREET ADDRESS	7399 N.W. 74TH STREET
CITY-ST-ZIP	MEDLEY, FL 33166
TITLE	MGR
NAME	SUAREZ, YAMELIS
STREET ADDRESS	7399 N.W. 74TH STREET
CITY-ST-ZIP	MEDLEY, FL 33166
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 608, Florida Statutes.

SIGNATURE:

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

MGR

3/20/08

Date

Daytime Phone #

FERNANDO SUAREZ

(305)

884-2255