2008 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED	
DOCUMENT # L06000063833 1. Entity Name VELVET PROPERTIES LLC				Apr 09, 2008 08:00 Al Secretary of State	
Principal Plac PO BOX 230 ST PETERSB		Mailing Address PO BOX 23041 ST PETERSBURG, FL 33742			
C	O NOT WRITE	IN THIS SPA	CE	03082008 No Chg-LLC CR2E083 (12/07) 4. FEI Number 20-5034117 Applied For Not Applicable 5. Certificate of Status Desired \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE STE 4 WESTON, FL 33331			-	DO NOT WRITE	
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					
FILE After May	NOWII! FEE IS \$138.75 7 1, 2008 Fee will be \$538.7!			U00000883725 04/22/08-80025-022_138.75	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM CARBO, VERNA PO BOX 23041 ST PETERSBURG, FL 33742 MGR DELELLIS, DORA 2462 LOFT AVE BALDWIN, NY 11510	RS/MANAGERS	- DO NOT WRITE IN THIS SPACE		
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					
11. 1 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. 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. VERNACAKEO SIGNATURE: BIGNATURE AND TYPED OR PRINTED NAME OF BRONING MANAGENG MEMBER, OR AUTHORIZED REPRESENTATIVE Date Device Proced Device Pro					