

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069876

Entity Name: SRT GLASS, LLC

FILED
Jan 03, 2008
Secretary of State

Current Principal Place of Business:

2675 WEST 76TH STREET
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2675 WEST 76TH STREET
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 20-5193891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAVENTOS, ANTONIO
2675 WEST 76TH STREET
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RAVENTOS, ANTONIO
Address: 2675 WEST 76TH STREET
City-St-Zip: HIALEAH, FL 33016

Title: MGR () Delete
Name: LOTUX INVESTMENTS LL, C
Address: 1001 NO FEDERAL HIGHWAY, #324
City-St-Zip: HALLANDALE, FL 33009

Title: MGR (X) Delete
Name: BATISTA, JOAO ROBERTO S
Address: 2675 WEST 76TH STREET
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RAVENTOS, ANTONIO
Address: 17743 SW 47 STREET
City-St-Zip: MIRAMAR, FL 33029

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ANTONIO RAVENTOS

MGR

01/03/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date