## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L06000101961

1. Entity Name

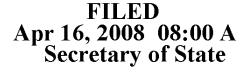
CARREIRA CONSULTING, LLC



Principal Place of Business

3542 JACINTO CT SARASOTA, FL 34239 Mailing Address

3542 JACINTO CT SARASOTA, FL 34239





04072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 20-5920612 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

CARREIRA, WILLIAM 3542 JACINTO CT SARASOTA, FL 34239

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

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstaling)

DATE

FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000900712 - 04/29/08-80039-018 138.75

MANAGING MEMBERS/MANAGERS 9. MGR TITI F CARREIRA, WILLIAM NAME 3542 JACINTO CT STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34239 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP 7IT) F NAME STREET ADDRESS CITY-ST-ZIP

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

X 4 12 08

Daytime Phone #