

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000102292

**FILED**  
**Jan 16, 2007**  
**Secretary of State**

**Entity Name:** SPECIALIZED DRILLING SERVICES, LLC

**Current Principal Place of Business:**

1107 SE 12TH PLACE  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 151062  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

**FEI Number:** 20-5743732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AIRTH, HAL A JR.  
500 SOUTH FLORIDA AVENUE  
SUITE 800  
LAKELAND, FL 33801 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: RAMVEST LTD. CO.,  
Address: P.O. BOX 151062  
City-St-Zip: CAPE CORAL, FL 33990 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RAMVEST LTD. CO.,  
Address: P.O. BOX 151062  
City-St-Zip: CAPE CORAL, FL 33990 US

I hereby certify that the information supplied with this filing does not qualify for the 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: RAMVEST LTD. CO.

MGRM

01/16/2007

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