

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L06000109476**

1. Entity Name  
**INETREFERRALS LLC**



Principal Place of Business <b>3 GROVE ISLE DR., APT. 1110 COCONUT GROVE, FL 33133</b>	Mailing Address <b>3 GROVE ISLE DR., APT. 1110 COCONUT GROVE, FL 33133</b>
---	---

**DO NOT WRITE IN THIS SPACE**



02252008 No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>20-8191326</b>	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired  **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RAMO, SCOTT  
515 E LAS OLAS BLVD  
NAPLES, FL 34102**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MONES, HARRIS 3 GROVE ISLE DR., APT. 1110 COCONUT GROVE, FL 33133</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000866411  
04/08/08-80027-020 138.75

**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:**  **3/9/08** **3054488134**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #