## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L06000111994

1. Entity Name

MEDALIAN REAL ESTATE & INVESTMENTS LLC



FILED May 22, 2008 08:00 AN Secretary of State

Principal Place of Business

784 US HWY 1 STE #1 NORTH PALM BEACH, FL 33408 Mailing Address

784 US HWY 1 STE #1 NORTH PALM BEACH, FL 33408



05192008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	56-2625254

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

MEDALIAN, JALIL 123 LAKE SHORE DR #143 NORTH PALM BEACH, FL 33408

## DO NOT WRITE IN THIS SPACE

				AND DOMESTIC PROPERTY OF A SECTION AND	80 20		abeliežs sažili ša	
	ve named entity submits this statement for t ations of registered agent.	he purpose of ch	ecordance with s. 607.193(2)(b), F.S., the limited lity company did not receive the prior notice.					
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R			(NOTE: Registered	Agent signature required when reinstating)		DATE		
FILE NOW!!! FEE IS \$138.75  Due by September 12, 2008  In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.								
9. MANAGING MEMBERS/MANAGERS				कुर्वा परिवार का भी करते हैं। अपने के अधिक के				
TITLE	MGRM			i marini na marangan ng pagagan s Badan da badan	<sup>ા</sup> પ્રતાસકોનું સું			
NAME	MEDALIAN, JALIL				orana brokasara. Barangara Harif	າກກາດຕ້າດດາ		
				make the second make a metal and a make the death of the first	and the company of the state of	MAN	COOMENTO EXPRESE	

TITLE	MGRM	3
NAME	MEDALIAN, JALIL	3
STREET ADDRESS	123 LAKE SHORE DR #143	- 1
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE		7
NAME		- 1
STREET ADDRESS		3
CITY-ST-ZIP		Ė
TITLE		7
NAME .		- 1
STREET ADDRESS	•	
CITY-ST-ZIP		*
TITLE		
NAME		ŝ
STREET ADDRESS		ź
CITY-ST-ZIP		ŝ
TITLE		
NAME		4
STREET ADDRESS		3
C/TY-ST-ZIP		
TITLE		1:
NAME		
STREET ADDRESS	the second of th	
CITY-ST-ZIP		
Unit-ai-58		ា

U00000951991 06/04/08-80061-020/138.75 

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the Information supplied with this filling 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

ER, OR AUTHORIZED REPRESENTATIVE

Daytima Phone #