

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
May 27, 2008 8:00 am
Secretary of State

05-02-2008 90013 035 ***138.75

DOCUMENT # L07000014361					
1. Entity Name CEDAR MOTEL LLC					
Principal Place of Business 3427 33RD AVENUE NORTH ST.PETERSBURG FL 33713 US			Mailing Address 1420 46TH AVENUE NORTH ST.PETERSBURG FL 33703 US		
2. Principal Place of Business - No P.O. Box # N/A		3. Mailing Address N/A			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 30-0465532	
Zip		Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
Zip		Country		Applied For Not Applicable	
6. Name and Address of Current Registered Agent BLIDAR, ROZALIA 1420 46TH AVENUE NORTH ST.PETERSBURG FL 33703			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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's signature required when re-electing)					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BLIDAR, ROZALIA 1420 46TH AVENUE NORTH ST.PETERSBURG FL 33703	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BLIDAR, ION 1420 46TH AVENUE NORTH ST.PETERSBURG FL 33703	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <i>Rozalia Blidar</i>			4-15-08 (727) 520-8032		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		