

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 17, 2008 8:00 am**  
**Secretary of State**

03-17-2008 90268 012 \*\*\*138.75

60015510



03132008 Chg-LLC CR2E083 (12/06)

4. FEI Number **20-8567663** Applied For  
Not Applicable

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

DOCUMENT # L07000024488

1. Entity Name  
SHI LER ENTERPRISES, LLC.



Principal Place of Business  
1541 WOOD VIOLET DRIVE  
ORLANDO, FL 32824

Mailing Address  
1541 WOOD VIOLET DRIVE  
ORLANDO, FL 32824

2. Principal Place of Business - No P.O. Box #  
**1526 GOLDEN POPPY CT**  
Suite, Apt. #, etc.

3. Mailing Address  
**1526 GOLDEN POPPY CT**  
Suite, Apt. #, etc.

City & State  
**ORLANDO, FL**  
Zip **32824** Country

City & State  
**ORLANDO, FL 32824**  
Zip **32824** Country

6. Name and Address of Current Registered Agent

CHOU, HUANG-JEN  
1541 WOOD VIOLET DRIVE  
ORLANDO, FL 32824

7. Name and Address of New Registered Agent

Name **LUNG-KAI HUANG**  
Street Address (P.O. Box Number is Not Acceptable)  
**1526 GOLDEN POPPY COURT**  
City **ORLANDO** FL Zip Code **32824**

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)*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**3-13-2008**  
DATE

**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 MGRM ☒ Delete  
NAME CHOU, HUANG-JEN  
STREET ADDRESS 1541 WOOD VIOLET DRIVE  
CITY-ST-ZIP ORLANDO, FL 32824

TITLE MGRM ☒ Change ☐ Addition  
NAME HUANG, LUNG-KAI  
STREET ADDRESS 1526 GOLDEN POPPY CT.  
CITY-ST-ZIP ORLANDO, FL 32824

TITLE MGRM ☐ Delete  
NAME LO, LING-CHING  
STREET ADDRESS 1526 GOLDEN PADDY COURT  
CITY-ST-ZIP ORLANDO, FL 32824

TITLE MGRM ☒ Change ☐ Addition  
NAME HUANG, BOB  
STREET ADDRESS 1526 GOLDEN POPPY CT.  
CITY-ST-ZIP ORLANDO, FL 32824

TITLE MGRM ☒ Delete  
NAME HSIAO, CHI-CHUAN  
STREET ADDRESS 1526 GOLDEN PADDY COURT  
CITY-ST-ZIP ORLANDO, FL 32824

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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)*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**3/13/08 (40T) 438-0375**  
Date Daytime Phone #