

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027372

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: SEBEK L.L.C.

**Current Principal Place of Business:**

1758 EAST SILVER STAR RD.  
OCOE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 554  
APOPKA, FL 32704

**New Mailing Address:**

FEI Number: 27-0069845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARRETT, MAVIS  
8027 BEECHDALE DR.  
ORLANDO, FL 32815 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: MGRM ( ) Delete  
Name: SWABY, NICOLA  
Address: PO BOX 554  
City-St-Zip: APOPKA, FL 32704  
  
Title: MGRM ( ) Delete  
Name: MAUSIR, CHARLES  
Address: 199 AFTOR SQ #107  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:  
  
Title: MGRM (X) Change ( ) Addition  
Name: MANSIR, CHARLES  
Address: PO BOX 554  
City-St-Zip: APOPKA, FL 32704

I hereby certify that the information supplied with this filing does not qualify 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: NICOLA SWABY

MGRM

04/30/2008

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