## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## **Secretary of State DOCUMENT # L07000053760** 03-12-2008 90238 038 \*\*\*138.75 SHANGRI-LA TEA OF FLORIDA, LLC Principal Place of Business Mailing Address 60014163 5161 EPPING LANE 5161 EPPING LANE ZEPHYRHILLS, FL 33541 ZEPHYRHILLS, FL 33541 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01282008 Chq-LLC CR2E083 (12/06) City & State City & State Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBERT F. COHEN, CPA Street Address (P.O. Box Number is Not Acceptable) 2918 BUSCH LAKE BLVD. TAMPA, FL 336141 City 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 . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to Florida Department of State - MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES ☐ Addition TITLE ☐ Change MARK STARTUMA NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MANAGEN - STADJUHUL ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT) F ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P Delete TITLE ☐ Change ■ Addition TITL F NAME NAME STREET ADDRESS 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.

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FILED Mar 12, 2008 8:00 am