

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001505

FILED
Apr 24, 2007
Secretary of State

Entity Name: QUATRO, LLC

Current Principal Place of Business:

C/O DUKE S. KASSOLIS
1436 GORMICAN LANE
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

C/O DUKE S. KASSOLIS
1436 GORMICAN LANE
NAPLES, FL 34110

New Mailing Address:

FEI Number: 52-2324928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASSOLIS, DUKE S MGRM
1436 GORMICAN LANE
NAPLES, FL 34110 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: KASSOLIS, DUKE S
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

Title: MGRM () Delete
Name: KASSOLIS, JANE S
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

Title: MGRM () Delete
Name: KASSOLIS, KRISTINA
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

Title: MGRM () Delete
Name: KASSOLIS, JONATHON
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KASSOLIS, JONATHAN
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the 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: DUKE KASSOLIS

MGR

04/24/2007

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