


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # M05000000840

1. Entity Name
 PAUL CIMINI, LLC



Principal Place of Business Mailing Address

89 REDWOOD DR 89 REDWOOD DR
 SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695

DO NOT WRITE IN THIS SPACE



04032008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1601056	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CIMINI, PAUL
 89 REDWOOD DR
 SAFETY HARBOR, FL 34695

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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 signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000896603
 04/25/08-80014-014 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CIMINI, PAUL P.O. BOX 1623 OLDSMAR, FL 34677
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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: Paul Cimini Paul Cimini 4-10-08 401-465-9057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #