FILED
Apr 16, 2008 08:00 AM
Secretary of State

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M06000000614

1. *Entity Name*
CRCI, LLC

Principal Place of Business	Mailing Address
6655 WEST SAHARA AVE., SUITE B-102 LAS VEGAS, NV 89146	6655 WEST SAHARA AVE., SUITE B-102 LAS VEGAS, NV 89146

DO NOT WRITE IN THIS SPACE

04102008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-1239792
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 32114

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

U00000300788
04/29/08-80043-004 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	ZIONIC MANAGEMENT INC.
STREET ADDRESS	6655 W. SAHARA AVE., SUITE B-102
CITY-ST-ZIP	LAS VEGAS, NV 89146
TITLE	MGR
NAME	COLLINS, CHADD R MGR
STREET ADDRESS	6655 W. SAHARA AVE., SUITE B-102
CITY-ST-ZIP	LAS VEGAS, NV 89146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 4/10/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #