

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # M06000000952

1. Entity Name
Z OPERATIONS LLC



Principal Place of Business
**5348 VEGAS DR.
LAS VEGAS, NV 89108**

Mailing Address
**5348 VEGAS DR.
LAS VEGAS, NV 89108**



03212008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-4577579

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**L.T.S.C., LLC
28 WEST PARK AVE
LAKE WALES, FL 33853**

**DO NOT WRITE
IN THIS SPACE**

B. 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 M. Warda

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/21/08
DATE

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

U000000874003
04/10/08-80102-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SENGER, N.
235 KEY DEER BLVD #12
BIG PINE KEY, FL 33043**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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. D. Senger

3/21/08