## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M0700003869

1. Entity Name

SS CANAL STREET NEW SMYRNA BEACH, LLC



Principal Place of Business

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SESSING MA

Mailing Address

7932 WEST SAND LAKE ROAD, SUITE 108 ORLANDO, FL 32819

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## FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90025 027 \*\*\*138.75

60031448



04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 26-0411613

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LSBEB AGENT SERVICES, INC. 390 NORTH ORANGE AVE., SUITE 600 ORLANDO, FL 32801

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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_	Signature, typed or printed name of registered agent and tritle if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'BRIEN, KURT 7932 WEST SAND LAKE ROAD, SUITE 108 ORLANDO, FL 32819		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME 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.			

MEMBER, OR AUTHORIZED REPRESENTATIVE