

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 26, 2008  
Secretary of State**

DOCUMENT# L00000004734

Entity Name: AAB INTERNATIONAL, LLC

**Current Principal Place of Business:**

18090 COLLINS AVE  
163  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

18090 COLLINS AVE  
163  
SUNNY ISLES, FL 33160

**New Mailing Address:**

FEI Number: 65-1013717      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLEIZER, GISELA R  
2417 NE 9 ST  
HALLANDALE, FL 33009      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: MGR      ( ) Delete  
Name: GLEIZER, DANIEL  
Address: 18090 COLLINS AVE 163  
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR      ( ) Delete  
Name: GLEIZER, GISELA  
Address: 18090 COLLINS AVE 163  
City-St-Zip: SUNNY ISLES, FL 33160

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL GLEIZER      MGR      01/26/2008

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