


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000005080 1. Entity Name B & B GRAPHICS, LLC	
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Principal Place of Business 730 BELVEDERE RD. WEST PALM BEACH, FL 33405	Mailing Address 730 BELVEDERE RD. WEST PALM BEACH, FL 33405
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DO NOT WRITE IN THIS SPACE



01072008No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-0130408	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

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BADER, WILLIAM C, CEO 730 BELVEDERE RD WEST PALM BEACH, FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BADER, WILLIAM J, VP 730 BELVEDERE RD WEST PALM BEACH, FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BADER, ARETTA F, SEC 5400 WESTERN AVE. WEST PALM BEACH, FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/16/08-80009-008 138.75

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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: W.C. Bader WILLIAM C. BADER 1-9-08 561-833-8063

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